2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000085351

Title:

Name: Address:

City-St-Zip:

PST

COLEMAN, JOHN J DPM

159 NORTH THIRD STREET MACCLENNY, FL 32063

Entity Name: JOHN J. COLEMAN, D.P.M., P.A.

FILED Aug 30, 2011 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	HTHIRD STRE NY, FL 32063	ET			
Current Mailing Address:			New Mailing Address:		
	HTHIRD STRE NY, FL 32063	ET			
FEI Number:	59-3670364	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
COLEMAN, JOHN J DPM 159 NORTH THIRD STREET MACCLENNY, FL 32063 US					
The above in the State		ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	c Signature of Registered Age	ent	Date	
OFFICERS	AND DIRECT	ORS:			
Title: Name: Address: City-St-Zip:	D COLEMAN, JOHN 159 NORTH THIF MACCLENNY, FL	RD STREET			

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN J COLEMAN PST 08/30/2011