2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000098151

Entity Name: SHARON R. CANTIN, P.A.

FILED Apr 30, 2012 Secretary of State

| Comment Bringing Block of | Business | New Principal Place | f Duningan | |
|--|-------------------------|-------------------------------|---|--|
| Current Principal Place of Business: | | New Principal Place o | i busilless. | |
| 4346 BROOKER CREEK DR PALM HARBOR, FL 34685 | R US | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 4346 BROOKER CREEK DR PALM HARBOR, FL 34685 | R US | | | |
| FEI Number: 59-3670082 F | El Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Na | | Name and Address of | Name and Address of New Registered Agent: | |
| CANTIN, SHARON R 4346 BROOKER CREEK DR PALM HARBOR, FL 34685 | R US | | | |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. | | | | |
| SIGNATURE: | | | | |
| Electronic Signature of Registered Agent | | nt | Date | |
| OFFICERS AND DIRECTOR | ne. | | | |

OFFICERS AND DIRECTORS:

Title: DF

Name: CANTIN, SHARON R
Address: 4346 BROOKER CREEK DR
City-St-Zip: PALM HARBOR, FL 34685 US

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: SHARON R CANTIN PD 04/30/2012