

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000107182

Entity Name: SARAH ROSS, P.A.

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2575 GLENFIELD DRIVE  
GREEN COVE SPRINGS, FL 32043

**New Principal Place of Business:**

1890-A COPPERSTONE DRIVE  
FLEMING ISLAND, FL 32003

**Current Mailing Address:**

2575 GLENFIELD DRIVE  
GREEN COVE SPRINGS, FL 32043

**New Mailing Address:**

1890-A COPPERSTONE DRIVE  
FLEMING ISLAND, FL 32003

FEI Number: 59-3682187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROSS, SARAH  
2575 GLENFIELD DRIVE  
GREEN COVE SPRINGS, FL 32043 US

**Name and Address of New Registered Agent:**

ROSS, SARAH  
1890-A COPPERSTONE DRIVE  
FLEMING ISLAND, FL 32003 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:

02/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: ROSS, SARAH  
Address: 1890-A COPPERSTONE DRIVE  
City-St-Zip: FLEMING ISLAND, FL 32003

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: SARAH L ROSS PA

PRES

02/28/2011

Electronic Signature of Signing Officer or Director

Date