

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000092203

Entity Name: HAMILTON GP, INC.

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

333 FIRST STREET NE, SUITE F  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

333 FIRST STREET NE  
SUITE F  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

333 FIRST STREET NE, SUITE F  
ST. PETERSBURG, FL 33701

**New Mailing Address:**

333 FIRST STREET NE  
SUITE F  
ST. PETERSBURG, FL 33701

FEI Number: 30-0121644

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAMILTON, JOHN M JR  
430 BRIGHTWATERS BLVD NE  
ST PETERSBURG, FL 33704 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HAMILTON, JOHN M MD  
Address: 333 FIRST STREET NE, SUITE F  
City-St-Zip: ST. PETERSBURG, FL 33701

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 M. HAMILTON, JR.

DIR

04/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date