

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000046571

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Entity Name:** OCTAVE INTEGRATION, INC.

**Current Principal Place of Business:**

1252 OKEECHOBEE ROAD  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

**Current Mailing Address:**

1252 OKEECHOBEE ROAD  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

**FEI Number:** 42-1534409

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARNOLD, WILLIAM S  
15772 86TH WAY NORTH  
PALM BEACH GARDENS, FL 33418 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:** D  
**Name:** ARNOLD, WILLIAM S  
**Address:** 15772 86TH WAY NORTH  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

**Title:** D  
**Name:** PONTIUS, JASON J  
**Address:** 8684 TREASURE CAY  
**City-St-Zip:** WEST PALM BEACH, FL 33411

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:** JASON PONTIUS

D

01/30/2012

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

\_\_\_\_\_  
Date