

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061785

**FILED**  
**Jan 23, 2011**  
**Secretary of State**

**Entity Name:** ANDREW J. MASON C.P.A., P.A.

**Current Principal Place of Business:**

1489 W PALMETTO PARK RD  
445  
BOCA RATON, FL 33486

**New Principal Place of Business:**

20283 STATE RD 7  
400  
BOCA RATON, FL 33498

**Current Mailing Address:**

1489 W PALMETTO PARK RD  
445  
BOCA RATON, FL 33486

**New Mailing Address:**

20283 STATE RD 7  
400  
BOCA RATON, FL 33498

**FEI Number:** 02-0613812

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MASON, ANDREW J  
9857 PALMA VISTA WAY  
BOCA RATON, FL 33428 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: MASON, ANDREW J  
Address: 9857 PALMA VISTA WAY  
City-St-Zip: BOCA RATON, FL 33428 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: ANDREW J MASON

PRES

01/23/2011

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

\_\_\_\_\_ Date