

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000101480

Entity Name: PROTOTYPE, INC.

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4311 SW 93 AVENUE  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

208 BRECKENRIDGE DR  
SIX MILE, SC 29682 US

**New Mailing Address:**

4311 SW 93 AVENUE  
DAVIE, FL 33328

FEI Number: 02-0644688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHEINFELD, ALAN  
2701 NW BOCA RATON BLVD  
114  
BOCA RATON, FL 33431 US

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

WILLIAM, EDMONDSON L III  
4311 SW 93 AVENUE  
DAVIE, FL 33328 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: WILLIAM L. EDMONDSON III

04/03/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: EDMONDSON, LISA G  
Address: 4311 SW 93 AVENUE  
City-St-Zip: DAVIE, FL 33328 US

Title: VP/D  
Name: EDMONDSON, WILLIAM L III  
Address: 4311 SW 93 AVENUE  
City-St-Zip: DAVIE, SC 33328 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: LISA G EDMONDSON

PRES

04/03/2012

Electronic Signature of Signing Officer or Director

Date