

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133707

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** PROFESSIONAL ASSESSMENT & CONSULTATION, INC.

**Current Principal Place of Business:**

3725 SE OCEAN BLVD.  
203  
STUART, FL 34996

**New Principal Place of Business:**

3559 SW CORPORATE PARKWAY  
PALM CITY, FL 34990

**Current Mailing Address:**

3725 SE OCEAN BLVD  
203  
STUART, FL 34996

**New Mailing Address:**

3559 SW CORPORATE PARKWAY  
PALM CITY, FL 34990

**FEI Number:** 27-0038996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MADDEN, JOHN W  
900 SE OCEAN BLVD  
SUITE 126C  
STUART, FL 34994 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

**Election Campaign Financing Trust Fund Contribution (X).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** JOHNSON, DENNIS L PH.D.  
**Address:** 3559 SW CORPORATE PARKWAY  
**City-St-Zip:** PALM CITY, FL 34990

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:** DENNIS L. JOHNSON, PH.D.

D

02/23/2010

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

\_\_\_\_\_  
Date