

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000026395

Entity Name: MARK W. FOX, P.A.

**FILED**  
**Mar 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

15916 ACORN CIRCLE  
TAVARES, FL 32778

**New Principal Place of Business:**

**Current Mailing Address:**

15916 ACORN CIRCLE  
TAVARES, FL 32778

**New Mailing Address:**

FEI Number: 65-1178054

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOX, MARK W ESQUIRE  
15916 ACORN CIRCLE  
TAVARES, FL 32778 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: ESQ  
Name: FOX, MARK W ESQUIRE  
Address: 15916 ACORN CIRCLE  
City-St-Zip: TAVARES, FL 32778

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: MARK W FOX

PRES

03/06/2011

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

\_\_\_\_\_  
Date