

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000083591

Entity Name: ALEX J. FONTAINE, P.A.

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

**Current Principal Place of Business:**

11911 U.S. HIGHWAY ONE  
201  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

89 TEAKWOOD CIRCLE  
TEQUESTA, FL 33469 US

**New Mailing Address:**

FEI Number: 74-3100128

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FONTAINE, ALEX J  
89 TEAKWOOD CIRCLE  
TEQUESTA, FL 33469 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: P  
Name: FONTAINE, ALEX J  
Address: 89 TEAKWOOD CIRCLE  
City-St-Zip: TEQUESTA, FL 33469 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: ALEX J. FONTAINE

P

04/30/2012

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

\_\_\_\_\_  
Date