## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075964

Entity Name: KAREN M. WALDROP, P.A.

FILED Apr 30, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3500 POWERLINE ROAD 3409 POWERLINE ROAD OAKLAND PARK, FL 33309

**SUITE 1101** 

FORT LAUDERDALE, FL 33309

**Current Mailing Address: New Mailing Address:** 

3500 POWERLINE ROAD 3409 POWERLINE ROAD

OAKLAND PARK, FL 33309 **SUITE 1101** 

FORT LAUDERDALE, FL 33309

FEI Number: 84-1647434 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KIDS THERAPY WORKS KIDS THERAPY WORKS 3409 POWERLINE ROAD 3500 POWERLINE ROAD

OAKLAND PARK, FL 33309 US SUITE 1101

FORT LAUDERDALE, FL 33309 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: KAREN M. WALDROP 04/30/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PSD

WALDROP, KAREN M Name:

3409 POWERLINE ROAD, SUITE 1101 Address: City-St-Zip: FORT LAUDERDALE, FL 33309

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: KAREN M. WALDROP **PSD** 04/30/2012