

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000167859

Entity Name: A.P. LISTROM, CPA, P.A.

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

1170 3RD STREET SO.  
STE. E-101  
NAPLES, FL 34102

## **New Principal Place of Business:**

877 91ST AVENUE NO  
STE. 2  
NAPLES, FL 34108

## **Current Mailing Address:**

1170 3RD STREET SO.  
STE. E-101  
NAPLES, FL 34102

## **New Mailing Address:**

877 91ST AVENUE NO  
STE. 2  
NAPLES, FL 34108

FEI Number: 02-0736519

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANTHONY, LISTROM  
1170 3RD STREET SO.  
STE. E-101  
NAPLES, FL 34102 US

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

ANTHONY, LISTROM  
877 91ST AVENUE NO  
STE. 2  
NAPLES, FL 34108 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:

04/30/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PVST  
Name: LISTROM, ANTHONY P  
Address: 877 91ST AVENUE NO. SUITE 2  
City-St-Zip: NAPLES, FL 34108

Title: D  
Name: LISTROM, ANTHONY P  
Address: 877 91ST AVENUE NO SUITE 2  
City-St-Zip: NAPLES, FL 34108

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: ANTHONY LISTROM

PRES

04/30/2011

Electronic Signature of Signing Officer or Director

Date