

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000000130

Entity Name: DONALD B. MAIRS, P.A.

FILED  
Feb 29, 2012  
Secretary of State

**Current Principal Place of Business:**

301 NORTH LIBERTY ST.  
JACKSONVILLE, FL 32202 US

**New Principal Place of Business:**

1035 LASALLE ST.  
JACKSONVILLE, FL 32207 US

**Current Mailing Address:**

301 NORTH LIBERTY ST.  
JACKSONVILLE, FL 32202 US

**New Mailing Address:**

1035 LASALLE ST.  
JACKSONVILLE, FL 32207 US

FEI Number: 20-2100210

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAIRS, DONALD B PSTD  
301 NORTH LIBERTY STREET  
JACKSONVILLE, FL 32202 US

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

MAIRS, DONALD B PSTD  
1035 LASALLE STREET  
JACKSONVILLE, FL 32207 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

02/29/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: MAIRS, DONALD B  
Address: 1035 LASALLE STREET  
City-St-Zip: JACKSONVILLE, FL 32207 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: DONALD B. MAIRS

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

PSTD

02/29/2012

\_\_\_\_\_  
Date