

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000066386

Entity Name: KARYN SOKOLOWSKI, P.A.

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

932 SEMINOLE WOODS BLVD  
GENEVA, FL 32732

**New Principal Place of Business:**

**Current Mailing Address:**

932 SEMINOLE WOODS BLVD  
GENEVA, FL 32732

**New Mailing Address:**

FEI Number: 20-2788084

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SOKOLOWSKI, KARYN  
932 SEMINOLE WOODS BLVD  
GENEVA, FL 32732 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: D,P  
Name: SOKOLOWSKI, KARYN  
Address: 932 SEMINOLE WOODS BLVD  
City-St-Zip: GENEVA, FL 32732

Title: VP  
Name: SOKOLOWSKI, MARK A  
Address: 932 SEMINOLE WOODS BLVD  
City-St-Zip: GENEVA, FL 32732

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: KARYN SOKOLOWSKI

D,P

03/17/2011

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

\_\_\_\_\_  
Date