2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000093632

Entity Name: MARTHA CHAMBERLAIN, P.A.

FILED Feb 22, 2011 Secretary of State

rtificate of Status Desired ()	
Name and Address of New Registered Agent:	
or registered agent, or both,	
Date	

OFFICERS AND DIRECTORS:

Title:

CHAMBERLAIN, MARTHA Name: 1590 HARBOURSIDE DR Address: City-St-Zip: WESTON, FL 33326

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 required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARTHA CHAMBERLAIN D 02/22/2011