

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000094482

Entity Name: GORDON HOMLEID, PA

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

540 ENCLAVE CIRCLE WEST  
PEMBROKE PINES, FL 33027 US

**New Principal Place of Business:**

**Current Mailing Address:**

540 ENCLAVE CIRCLE WEST  
PEMBROKE PINES, FL 33027 US

**New Mailing Address:**

FEI Number: 20-3101217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOMLEID, GORDON  
540 ENCLAVE CIRCLE WEST  
PEMBROKE PINES, FL 33027 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: P, D  
Name: HOMLEID, GORDON  
Address: 540 ENCLAVE CIRCLE WEST  
City-St-Zip: PEMBROKE PINES, FL 33027 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: GORDON HOMLEID

P, D

03/21/2012

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

\_\_\_\_\_  
Date