

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000024668

Entity Name: LINDA JACOBS, P.A.

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

28200 BERMONT ROAD  
2D  
PUNTA GORDA, FL 33982

**New Principal Place of Business:**

64 OAK ST  
NORTH FORT MYERS, FL 33903

**Current Mailing Address:**

P.O. BOX 7351  
FORT MYERS, FL 33911

**New Mailing Address:**

FEI Number: 20-4321255

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JACOBS, LINDA  
28200 BERMONT ROAD  
2D  
PUNTA GORDA, FL 33982 US

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

JACOBS, LINDA  
64 OAK ST  
NORTH FORT MYERS, FL 33903 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

04/24/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: JACOBS, LINDA  
Address: P.O. BOX 7351  
City-St-Zip: FORT MYERS, FL 33911

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: LINDA JACOBS

DP

04/24/2012

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

\_\_\_\_\_  
Date