

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000115695

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**Entity Name:** FINANCIAL ASSESSMENT & RECOVERY, INC.

**Current Principal Place of Business:**

3340 CRENSHAW LAKE RD.  
LUTZ, FL 33548

**New Principal Place of Business:**

1252 HARWIG CIRCLE  
STEAMBOAT SPRINGS, CO 80487 US

**Current Mailing Address:**

P.O. BOX 273196  
TAMPA, FL 336883196 US

**New Mailing Address:**

1252 HARWIG CIRCLE  
STEAMBOAT SPRINGS, CO 80487 US

**FEI Number:** 20-5532284

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MYERS, WILLIAM  
3340 CRENSHAW LAKE RD.  
LUTZ, FL 33548 US

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

MYERS, WILLIAM P  
3225 S. MACDILL AVE.  
TAMPA, FL 33629 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: WILLIAM P MYERS

03/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: MYERS, MARTHA W  
Address: P.O. BOX 775205  
City-St-Zip: STEAMBOAT SPRINGS, CO 80477

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: MARTHA W MYERS

PS

03/25/2011

Electronic Signature of Signing Officer or Director

Date