

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000139867

Entity Name: STEPHEN J. POWERS, INC.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4223 SOUTHWEST RIVERS END WAY  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

4223 SOUTHWEST RIVERS END WAY  
PALM CITY, FL 34990

**New Mailing Address:**

FEI Number: 22-3946392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: DPS  
Name: POWERS, STEPHEN J  
Address: 4223 SOUTHWEST RIVERS END WAY  
City-St-Zip: PALM CITY, FL 34990

Title: DVT  
Name: POWERS, JOANNE M  
Address: 4223 SOUTHWEST RIVERS END WAY  
City-St-Zip: PALM CITY, FL 34990

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: STEPHEN J. POWERS

MR.

01/06/2012

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

\_\_\_\_\_  
Date