

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000047440

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** NICOLE M. CAMERON, P.A.

**Current Principal Place of Business:**

236 APOLLO BEACH BLVD.  
APOLLO BCH, FL 33572

**New Principal Place of Business:**

449 APOLLO BEACH BLVD.  
APOLLO BCH, FL 33572

**Current Mailing Address:**

235 APOLLO BEACH BLVD.  
#231  
APOLLO BEACH, FL 33572

**New Mailing Address:**

**FEI Number:** 20-8870132      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CAMERON, NICOLE M ESQ.  
236 APOLLO BEACH BLVD.  
APOLLO BCH, FL 33572      US

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

CAMERON, NICOLE M ESQ.  
449 APOLLO BEACH BLVD.  
APOLLO BCH, FL 33572      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: NICOLE CAMERON

02/13/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CAMERON, NICOLE M  
Address: 5414 CONCH SHELL PLACE  
City-St-Zip: APOLLO BCH, FL 33572

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: NICOLE CAMERON

D

02/13/2012

Electronic Signature of Signing Officer or Director

Date