

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000063977

Entity Name: JOHN M. WICKER, PA

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

**Current Principal Place of Business:**

12670 NEW BRITTANY BOULEVARD  
SUITE 101  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

JOHN M WICKER PA  
P O DRAWER 60205  
FORT MYERS, FL 33906

**New Mailing Address:**

FEI Number: 26-0260524

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

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

WICKER, JOHN M  
12670 NEW BRITTANY BOULEVARD  
SUITE 101  
FORT MYERS, FL 33907 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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: WICKER, JOHN M  
Address: 12670 NEW BRITTANY BOULEVARD, SUITE 101  
City-St-Zip: FORT MYERS, FL 33907

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: JOHN M. WICKER

DP

01/25/2011

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

\_\_\_\_\_  
Date