

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000075809

**FILED**  
**Mar 17, 2012**  
**Secretary of State**

**Entity Name:** ELIZABETH P. DAVIES, CPA, PA

**Current Principal Place of Business:**

3911 WEST NEWBERRY RD  
SUITE C-2  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

**Current Mailing Address:**

3911 WEST NEWBERRY RD  
SUITE C-2  
GAINESVILLE, FL 32607

**New Mailing Address:**

**FEI Number:** 26-0445965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIES, ELIZABETH P  
3911 W NEWBERRY RD  
STE C-2  
GAINESVILLE, FL 32607 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: P  
Name: DAVIES, ELIZABETH P  
Address: 3911 W NEWBERRY RD  
City-St-Zip: GAINESVILLE, FL 32607

Title: T  
Name: DAVIES, ELIZABETH P  
Address: 3911 W NEWBERRY RD  
City-St-Zip: GAINESVILLE, FL 32607

Title: S  
Name: DAVIES, ELIZABETH P  
Address: 3911 W NEWBERRY RD  
City-St-Zip: GAINESVILLE, FL 32607

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: ELIZABETH DAVIES

P

03/17/2012

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

\_\_\_\_\_ Date