

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000042505

Entity Name: THOMAS M SPOTTS, PA

FILED  
Jan 23, 2012  
Secretary of State

**Current Principal Place of Business:**

5090 DOUG TAYLOR CIRCLE  
ST JAMES CITY, FL 33956

**New Principal Place of Business:**

**Current Mailing Address:**

5090 DOUG TAYLOR CIRCLE  
ST JAMES CITY, FL 33956

**New Mailing Address:**

FEI Number: 26-2352809

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SWAN, LAWRENCE  
709 CAPE CORAL PKWY WEST  
CAPE CORAL, FL 33914 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: DDS  
Name: SPOTTS, THOMAS M  
Address: 5090 DOUG TAYLOR CIRCLE  
City-St-Zip: ST JAMES CITY, FL 33956

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: THOMAS M SPOTTS

DDS

01/23/2012

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

\_\_\_\_\_  
Date