

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000064862

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** CHAMBERLIN BUTLER & CROWE, PA

**Current Principal Place of Business:**

3001 N. ROCKY POINT DR. EAST  
SUITE # 200  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

3001 N. ROCKY POINT DR. EAST  
SUITE # 200  
TAMPA, FL 33607 US

**New Mailing Address:**

**FEI Number:** 26-2933281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAMBERLIN, HUNTER H  
5725 N. NEBRASKA AVE.  
TAMPA, FL 33604 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: PD  
Name: CHAMBERLIN, HUNTER H  
Address: 3001 N. ROCKY POINT DR. EAST, STE. 200  
City-St-Zip: TAMPA, FL 33607

Title: TD  
Name: BUTLER, GARY L  
Address: 3001 N. ROCKY POINT DR. EAST, STE. 200  
City-St-Zip: TAMPA, FL 33607

Title: D  
Name: CROWE, DANIEL H  
Address: 3001 N. ROCKY POINT DR. EAST, STE. 200  
City-St-Zip: TAMPA, FL 33607

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: GARY L. BUTLER

DIR.

04/30/2011

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

\_\_\_\_\_  
Date