

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000075683

**FILED**  
**May 26, 2012**  
**Secretary of State**

**Entity Name:** JEFFREY SCOTT KURTZ, P.A.

**Current Principal Place of Business:**

701 NORTHPOINT PARKWAY  
SUITE 209  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

701 NORTHPOINT PARKWAY  
SUITE 209  
WEST PALM BEACH, FL 33407 UN

**Current Mailing Address:**

P.O. BOX 382  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

**FEI Number:** 90-0406812

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KURTZ, JEFFREY S  
701 NORTHPOINT PARKWAY  
SUITE 209  
WEST PALM BEACH, FL 33407 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: KURTZ, JEFFREY S JEFFREY  
Address: 701 NORTHPOINT PARKWAY, SUITE 209,  
City-St-Zip: WEST PALM BEACH, FL 33407 US

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: JEFFREY S. KURTZ

P

05/26/2012

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

\_\_\_\_\_  
Date