

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096933

FILED  
Apr 05, 2012  
Secretary of State

**Entity Name:** MICHELLE HINES BAUTISTA ARNP, INC.

**Current Principal Place of Business:**

2507 HARRISON AVE STE 201  
PANAMA CITY, FL 324054447

**New Principal Place of Business:**

**Current Mailing Address:**

2507 HARRISON AVE STE 201  
PANAMA CITY, FL 324054447

**New Mailing Address:**

**FEI Number:** 26-3621637

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAUTISTA, MICHELLE ARNP  
752 HARRISON AVE  
PANAMA CITY, FL 32401 US

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

BAUTISTA, MICHELLE ARNP  
2507 HARRISON AVENUE SUITE 201  
PANAMA CITY, FL 324054447 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: MICHELLE BAUTISTA ARNP

04/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BAUTISTA, MICHELLE H  
Address: 537 BUNKERS COVE RD.  
City-St-Zip: PANAMA CITY, FL 32401

Title: VP  
Name: SMITH, SHIRLEY  
Address: 7517 LINDA LANE  
City-St-Zip: PANAMA CITY, FL 32401

Title: T  
Name: HINES, GEORGE  
Address: 1603 RHODE ISLAND AVE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: CFO  
Name: FLEMMING, MACHON  
Address: 553 BLUE HERON DR.  
City-St-Zip: PANAMA CITY, FL 32404

Title: S  
Name: COSSON, BRENDA  
Address: 8020 OWL LANE  
City-St-Zip: YOUNGSTOWN, FL 32466

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: MICHELLE BAUTISTA ARNP

PD

04/05/2012

Electronic Signature of Signing Officer or Director

Date