

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000018901

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** LAW OFFICE OF SHELLY K. THOMAS, P.A

**Current Principal Place of Business:**

249 E. SIXTH AVENUE  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

822 N. MONROE ST  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

249 E. SIXTH AVENUE  
TALLAHASSEE, FL 32303

**New Mailing Address:**

822 N. MONROE ST  
TALLAHASSEE, FL 32303

**FEI Number:** 26-4663368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

THOMAS, SHELLY K  
249 EAST SIXTH AVENUE  
TALLAHASSEE, FL 32303 US

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

THOMAS, SHELLY K  
822 N. MONROE ST  
TALLAHASSEE, FL 32303 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:

01/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: THOMAS, SHELLY K  
Address: 822 N. MONROE ST  
City-St-Zip: TALLAHASSEE, FL 32303

Title: SEC  
Name: THOMAS, SHELLY K  
Address: 822 N. MONROE ST  
City-St-Zip: TALLAHASSEE, FL 32303

Title: PRES  
Name: THOMAS, SHELLY K  
Address: 822 N. MONROE ST  
City-St-Zip: TALLAHASSEE, FL 32303

Title: ASST  
Name: LEWIS, KRISTINE S  
Address: 822 N. MONROE ST  
City-St-Zip: TALLAHASSEE, FL 32303

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: KRISTINESLEWIS

ASST

01/06/2012

Electronic Signature of Signing Officer or Director

Date