

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000044974

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** DANIELLE RENNE ST. ONGE, PA

**Current Principal Place of Business:**

4415 SE 14TH PLACE  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

3960 CHERRYBROOK LOOP  
FORT MYERS, FL 33966

**Current Mailing Address:**

4415 SE 14TH PLACE  
CAPE CORAL, FL 33904

**New Mailing Address:**

3960 CHERRYBROOK LOOP  
FORT MYERS, FL 33966

**FEI Number:** 27-0377070

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ST. ONGE, DANIELLE R  
4415 SE 14TH PLACE  
CAPE CORAL, FL 33904 US

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

ST. ONGE, DANIELLE R  
3960 CHERRYBROOK LOOP  
FORT MYERS, FL 33966 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:** DANIELLE R ST. ONGE

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** ST. ONGE, DANIELLE R  
**Address:** 3960 CHERRYBROOK LOOP  
**City-St-Zip:** FORT MYERS, FL 33966

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:** DANIELLE R. ST. ONGE

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date