

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000063448

Entity Name: LAURA A. ZIPRIS, PA

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5300 WEST ATLANTIC AVENUE, SUITE 604  
DELRAY BEACH, FL 33484 US

**New Principal Place of Business:**

**Current Mailing Address:**

5300 WEST ATLANTIC AVENUE, SUITE 604  
DELRAY BEACH, FL 33484 US

**New Mailing Address:**

FEI Number: 27-0623447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ZIPRIS, LAURA A  
7252 COPPERFIELD  
CIRCLE  
LAKE WORTH, FL 33467 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: ZIPRIS, LAURA A  
Address: 7252 COPPERFIELD CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467 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: LAURA A. ZIPRIS

DR.

01/24/2012

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

\_\_\_\_\_  
Date