

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000093897

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** THE LAW OFFICE OF PAMELA J. PEDLOW, P.A.

**Current Principal Place of Business:**

242 SAND PINE RD.  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

909 E. NEW HAVEN AVE.  
SUITE 206  
MELBOURNE, FL 32901

**Current Mailing Address:**

PO BOX 360566  
MELBOURNE, FL 32936 US

**New Mailing Address:**

909 E. NEW HAVEN AVE.  
SUITE 206  
MELBOURNE, FL 32901

**FEI Number:** 27-1313400

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEDLOW, PAMELA J ESQ.  
242 SAND PINE RD  
INDIALANTIC, FL 32903 US

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

PEDLOW, PAMELA J ESQ.  
909 E. NEW HAVEN AVE.  
SUITE 206  
MELBOURNE, FL 32901 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:

02/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PEDLOW, PAMELA J ESQ  
Address: 909 E. NEW HAVEN AVE., SUITE 206  
City-St-Zip: MELBOURNE, FL 32901

Title: S  
Name: PEDLOW, PAMELA J ESQ  
Address: 909 E. NEW HAVEN AVE., SUITE 206  
City-St-Zip: MELBOURNE, FL 32901

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: PAMELA J. PEDLOW

P

02/09/2012

Electronic Signature of Signing Officer or Director

Date