## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000020861

Entity Name: ASK THERAPIST FRAN P.A.

Feb 11, 2011 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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2439 TREASURE ISLE DRIVE A6 2439 TREASURE ISLE DRIVE PALM BEACH GARDENS, FL 33410

A-6

PALM BEACH GARDENS, FL 33410

**Current Mailing Address: New Mailing Address:** 

2439 TREASURE ISLE DRIVE 2439 TREASURE ISLE DRIVE A6 PALM BEACH GARDENS, FL 33410 A-6

PALM BEACH GARDENS, FL 33410

FEI Number: 27-2092174 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SHERMAN, FRAN 2439 TREASURE ISLE DRIVE A6 PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title:

SHERMAN, FRAN Name:

2439 TREASURE ISLE DRIVE A6 Address: City-St-Zip: PALM BEACH GARDENS, FL 33410

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: FRAN SHERMAN PD 02/11/2011