

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000035286

Entity Name: WILLIAM C. STALIONS, P.A.

FILED
Jan 11, 2011
Secretary of State

Current Principal Place of Business:

1700 S. FLAMINGO RD.
SUITE 145
DAVIE, FL 33325

New Principal Place of Business:

5220 S. UNIVERSITY DR.
SUITE C-109
DAVIE, FL 33328

Current Mailing Address:

1700 S. FLAMINGO RD.
SUITE 145
DAVIE, FL 33325

New Mailing Address:

5220 S. UNIVERSITY DR.
SUITE C-109
DAVIE, FL 33328

FEI Number: 65-0362476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STALIONS, WILLIAM C
1700 S. FLAMINGO RD.
SUITE 145
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

STALIONS, WILLIAM C
5220 S. UNIVERSITY DR.
SUITE C-109
DAVIE, FL 33328 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:

01/11/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STALIONS, WILLIAM C
Address: 5220 S. UNIVERSITY DR., SUITE C-109
City-St-Zip: DAVIE, FL 33328

Title: S
Name: STALIONS, LINDA
Address: 5220 S. UNIVERSITY DR., SUITE C-109
City-St-Zip: DAVIE, FL 33328

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: WILLIAM C. STALIONS

P

01/11/2011

Electronic Signature of Signing Officer or Director

Date