

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000074752

FILED  
Jan 11, 2012  
Secretary of State

**Entity Name:** MAURICE TAYLOR ASSOCIATES CORPORATION

**Current Principal Place of Business:**

1825 E. GORDON DRIVE  
NAPLES, FL 34102 US

**New Principal Place of Business:**

1825 E. GORDON DRIVE  
SHIP\_TO\_ADDRESS<>ADDRESS2  
NAPLES, FL 34102 US

**Current Mailing Address:**

1825 E. GORDON DRIVE  
NAPLES, FL 34102 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

TAYLOR, MAURICE  
1825 E. GORDON DRIVE  
NAPLES, FL 34102 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: TAYLOR, MAURICE  
Address: 1825 E. GORDON DRIVE  
City-St-Zip: NAPLES, FL 34102 US

Title: S  
Name: TAYLOR, MAURICE  
Address: 1825 E. GORDON DRIVE  
City-St-Zip: NAPLES, FL 34102 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: MAURICE M TAYLOR

P

01/11/2012

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

\_\_\_\_\_  
Date