

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000086648

**Entity Name:** BRONWYN MCKEIVER, INC.

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

994 N BARFIELD DR #9  
MARCO ISLAND, FL 34145 US

**New Principal Place of Business:**

994 N BARFIELD DR #9  
UNIT A  
MARCO ISLAND, FL 34145 US

**Current Mailing Address:**

994 N BARFIELD DR #9  
MARCO ISLAND, FL 34145 US

**New Mailing Address:**

**FEI Number:** 45-2807300      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MCKEIVER, BRONWYN  
994 N BARFIELD DR #9  
MARCO ISLAND, FL 34145 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: PTS  
Name: MCKEIVER, BRONWYN  
Address: 994 N BARFIELD DR #9  
City-St-Zip: MARCO ISLAND, FL 34145 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: BRONWYN MCKEIVER

P

03/29/2012

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

\_\_\_\_\_  
Date