

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000021695

**Entity Name:** 4A AUTOPSY SERVICES, P.A.

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

**Current Principal Place of Business:**

2587 WINDWOOD LANE  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1901  
ORANGE PARK, FL 320671901

**New Mailing Address:**

2587 WINDWOOD LANE  
ORANGE PARK, FL 32073

**FEI Number:** 27-5400264

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATSON, TODD  
12276 SAN JOSE BLVD SUITE 721  
JACKSONVILLE, FL 32223 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: DR  
Name: STROH, WENDY  
Address: 2587 WINDWOOD LANE  
City-St-Zip: ORANGE PARK, FL 32073

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: WENDY STROH

DR

04/09/2012

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

\_\_\_\_\_  
Date