

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000057734

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** F & I PROVIDERS AND ADMINISTRATORS ASSOCIATION, INC.

**Current Principal Place of Business:**

3017 NAUGHTON WAY  
TARPON SPRINGS, FL 34688

**New Principal Place of Business:**

**Current Mailing Address:**

3017 NAUGHTON WAY  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

**FEI Number:** 45-2716396

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JEFFRIES, DAVID M  
1227 N FRANKLIN ST  
TAMPA, FL 33602 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: D  
Name: GESUALDO, DAVID  
Address: 3017 NAUGHTON WAY  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D  
Name: KIMBER, ADAM  
Address: 15821 SHERBECK LN  
City-St-Zip: HUNTINGTON BEACH, CA 92647

Title: D  
Name: GANTHER, JAMES  
Address: PO BOX 10621  
City-St-Zip: TAMPA, FL 33679

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: DAVID GESUALDO

DIR

04/26/2012

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

\_\_\_\_\_  
Date