

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000063786

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** DRAKE LAW FIRM, P.A.

**Current Principal Place of Business:**

4651 SALISBURY ROAD  
4TH FLOOR, SUITE 509  
JACKSONVILLE, FL 32256 US

**New Principal Place of Business:**

**Current Mailing Address:**

4651 SALISBURY ROAD  
4TH FLOOR, SUITE 509  
JACKSONVILLE, FL 32256 US

**New Mailing Address:**

**FEI Number:** 45-2759669

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DRAKE, BRENDA A  
12123 SAFESHELTER DR. S.  
JACKSONVILLE, FL 32225 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:** DRAKE, BRENDA A  
**Address:** 4561 SALISBURY ROAD, 4TH FLOOR, SUITE 509  
**City-St-Zip:** JACKSONVILLE, FL 32225 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:** BRENDA A DRAKE

P

03/14/2012

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

\_\_\_\_\_  
Date