

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000075087

Entity Name: PRATHER & SWANK, P.A.

FILED  
Jan 11, 2012  
Secretary of State

**Current Principal Place of Business:**

10175 SIX MILE CYPRESS PKWY  
STE 4  
FORT MYERS, FL 33966

**New Principal Place of Business:**

**Current Mailing Address:**

10175 SIX MILE CYPRESS PKWY  
STE 4  
FORT MYERS, FL 33966

**New Mailing Address:**

FEI Number: 45-3075043

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWANK, BRITTON G  
10175 SIX MILE CYPRESS PKWY  
STE 4  
FORT MYERS, FL 33966 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: PTD  
Name: PRATHER, BETH A  
Address: 10175 SIX MILE CYPRESS PARKWAY, SUITE 4  
City-St-Zip: FORT MYERS, FL 33966

Title: VSD  
Name: SWANK, BRITTON G  
Address: 10175 SIX MILE CYPRESS PARKWAY, SUITE 4  
City-St-Zip: FORT MYERS,, FL 33966

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: BRITTON G. SWANK

VP

01/11/2012

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

\_\_\_\_\_  
Date