

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000094125

Entity Name: PHONETICALLY SPEAKING INC

FILED  
Apr 09, 2012  
Secretary of State

**Current Principal Place of Business:**

616 S BRANCH DR  
ST JOHNS, FL 32259

**New Principal Place of Business:**

616 SOUTHBRANCH DR  
ST JOHNS, FL 32259

**Current Mailing Address:**

616 S BRANCH DR  
ST JOHNS, FL 32259

**New Mailing Address:**

616 SOUTHBRANCH DR  
ST JOHNS, FL 32259

FEI Number: 45-3801533

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LEONARD, CAROLYN P  
616 S BRANCH DR  
ST JOHNS, FL 32259 US

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

LEONARD, CAROLYN P  
616 SOUTHBRANCH DR  
ST JOHNS, FL 32259 US

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: CAROLYN PAIGE LEONARD

04/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LEONARD, CAROLYN P  
Address: 616 SOUTHBRANCH DR  
City-St-Zip: ST JOHNS, FL 32259

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: CAROLYN PAIGE LEONARD

PD

04/09/2012

Electronic Signature of Signing Officer or Director

Date