

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P27497

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** EDWARD M. SEGARS & ASSOCIATES, INC.

**Current Principal Place of Business:**

6000 A SAWGRASS VILLAGE CIR  
SUITE 10  
PONTE VEDRA BEACH, FL 32082 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2289  
PONTE VEDRA BCH., FL 32004 US

**New Mailing Address:**

**FEI Number:** 58-1323967

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEGARS, EDWARD M  
6000A SAWGRASS VILLAGE CR  
SUITE 10  
PONTE VEDRA BEACH, FL 32082 US

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

SEGARS, EDWARD M  
6000A SAWGRASS VILLAGE CR  
SUITE 10  
PONTE VEDRA BEACH, FL 32082 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:** EDWARD M. SEGARS

03/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** EDWARD M. SEGARS & ASSOC., INC.  
**Address:** 6000 A SAWGRASS VILLAGE CIRCLE #10  
**City-St-Zip:** PONTE VEDRA BCH., FL 32082

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:** EDWARD M. SEGARS

PRES

03/16/2011

Electronic Signature of Signing Officer or Director

Date