

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000018755

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** MALIA CHRISTINE FINGER, P.A.

**Current Principal Place of Business:**

212 CLATTER BRIDGE RD  
PONTE VEDRA BCH, FL 32081 US

**New Principal Place of Business:**

**Current Mailing Address:**

212 CLATTER BRIDGE RD  
PONTE VEDRA BEACH, FL 32081 US

**New Mailing Address:**

FEI Number: 59-3169294

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FINGER, MALIA C  
212 CLATTER BRIDGE RD  
PONTE VEDRA BEACH, FL 32081 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: PSTD  
Name: FINGER, MALIA C  
Address: 212 CLATTER BRIDGE ROAD  
City-St-Zip: PONTE VEDRA BEACH, FL 32081

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: MALIA C. FINGER

PRES

03/17/2011

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

\_\_\_\_\_ Date