

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000005031

Entity Name: DOWDY & NIELSEN, P.A.

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

720 W STATE RD 434  
WINTER SPRINGS, FL 32708

## **New Principal Place of Business:**

## **Current Mailing Address:**

475 MONTGOMERY PL  
ALTAMONTE SPRINGS, FL 32714

## **New Mailing Address:**

30 SKYLINE DRIVE  
200  
LAKE MARY, FL 32746

FEI Number: 59-3350824

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COHEN FLORIDA  
475 MONTGOMERY PL  
ALTAMONTE SPRINGS, FL 32714 US

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

KELLEY & ASSOCIATES, LLC  
30 SKYLINE DRIVE  
200  
LAKE MARY, FL 32746 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: KYLE H. KELLEY

04/11/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: NIELSEN, MICHAEL W  
Address: 720 W STATE RD 434  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D  
Name: DOWDY, J. JEFFERY  
Address: 720 W STATE RD 434  
City-St-Zip: WINTER SPRINGS, FL 32708

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: MICHAEL W. NIELSEN

PD

04/11/2011

Electronic Signature of Signing Officer or Director

Date