

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000026937

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** GARY C. MATZNER, P.A.

**Current Principal Place of Business:**

2525 PONCE DE LEON BOULEVARD  
SUITE 400  
MIAMI, FL 33134 US

**New Principal Place of Business:**

800 SOUTH DOUGLAS ROAD  
SUITE 530  
MIAMI, FL 33134 US

**Current Mailing Address:**

2525 PONCE DE LEON BOULEVARD  
SUITE 400  
MIAMI, FL 33134 US

**New Mailing Address:**

800 SOUTH DOUGLAS ROAD  
SUITE 530  
MIAMI, FL 33134 US

**FEI Number:** 65-0573170

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARY C MATNER  
2525 PONCE DE LEON BOULEVARD  
SUITE 400  
MIAMI, FL 33134 US

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

GARY C MATNER  
800 SOUTH DOUGLAS ROAD  
SUITE 530  
MIAMI, FL 33134 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: GARY C. MATZNER

04/26/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MATZNER, GARY C  
Address: 800 SOUTH DOUGLAS ROAD, SUITE 530  
City-St-Zip: MIAMI, FL 33134 US

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: GARY C. MATZNER

PD

04/26/2012

Electronic Signature of Signing Officer or Director

Date