

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000036710

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** DEVILLE AND PELLAND P.A.

**Current Principal Place of Business:**

15163 86TH ROAD NORTH  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

15163 86TH RD NORTH  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

**FEI Number:** 65-0594866

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PELLAND, CHRISTIANE PSTD  
15163 86TH RD NORTH  
LOXAHATCHEE, FL 33470 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: PELLAND, CHRISTIANE  
Address: 15163 86TH ROAD NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

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: CHRISTIANE PELLAND

PRES

02/08/2012

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

\_\_\_\_\_ Date