

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000051388

FILED
Feb 11, 2012
Secretary of State

Entity Name: SALTER FEIBER, P.A.

Current Principal Place of Business:

3940 NW 16TH BLVD
BLDG B
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 357399
GAINESVILLE, FL 326357399 US

New Mailing Address:

FEI Number: 59-3322294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALTER, JAMES D
3940 NW 16TH BLVD
BLDG B
GAINESVILLE, FL 32605 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: D
Name: SALTER, JAMES D
Address: 3940 NW 16TH BLVD , BLDG B
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: FEIBER, JAMES G JR
Address: 3940 NW 16TH BLVD , BLDG B
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: MURPHY, MELISSA J
Address: 3940 NW 16TH BLVD , BLDG B
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: HUTSON, DENISE L
Address: 3940 NW 16TH BLVD , BLDG B
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: MENET, DAVID E
Address: 3940 NW 16TH BLVD. BLDG. B
City-St-Zip: GAINESVILLE, FL 32605

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: JAMES D SALTER

D

02/11/2012

Electronic Signature of Signing Officer or Director

_____ Date