

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000097000

Entity Name: JOHN E. WATSON, P.A.

**FILED**  
**Feb 23, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

655-19TH AVE NE  
ST PETERSBURG, FL 33704 US

**New Principal Place of Business:**

**Current Mailing Address:**

655-19TH AVE NE  
ST PETERSBURG, FL 33704 US

**New Mailing Address:**

FEI Number: 59-3360706

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WATSON, JOHN E  
655-19TH AVE NE  
ST. PETERSBURG, FL 33707 US

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

WATSON, JOHN E  
655-19TH AVE NE  
ST. PETERSBURG, FL 33704 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: JOHN E. WATSON

02/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WATSON, JOHN E  
Address: 655 19TH AVENUE N.E.  
City-St-Zip: ST. PETERSBURG, FL 33704

Title: STD  
Name: WATSON, PATRICIA E  
Address: 655 19TH AVENUE N.E.  
City-St-Zip: ST. PETERSBURG, FL 33704

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: JOHN E. WATSON

PRES

02/23/2012

Electronic Signature of Signing Officer or Director

Date