# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 15, 2011**
**Secretary of State**

DOCUMENT# P96000010624

**Entity Name:** LAW OFFICE OF JACK L. TOWNSEND, SR., P.A.

**Current Principal Place of Business:**

6408 E FOWLER AV
TAMPA, FL 33617 US

**New Principal Place of Business:**

6408 E FOWLER AVE
TAMPA, FL 33617 US

**Current Mailing Address:**

6408 E FOWLER AV
TAMPA, FL 33617 US

**New Mailing Address:**

6408 E FOWLER AVE
TAMPA, FL 33617 US

**FEI Number: 59-3360906** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

TOWNSEND, JACK L SR
710 ROB ROY PLACE
TEMPLE TERRACE, FL 33617 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: P
Name: TOWNSEND, JACK L SR.
Address: 6408 E FOWLER AVE
City-St-Zip: TAMPA, FL 33617

Title: T
Name: TOWNSEND, HELEN C
Address: 6408 E FOWLER AVE
City-St-Zip: TAMPA, FL 33617

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: HELEN TOWNSEND T 04/15/2011
Electronic Signature of Signing Officer or Director Date