

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000040465

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** GYARMATHY & ASSOCIATES, INC.

**Current Principal Place of Business:**

13180 NORTH CLEVELAND AVE.  
SUITE 111  
N FT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

13180 NORTH CLEVELAND AVE.  
SUITE 111  
N FT MYERS, FL 33903

**New Mailing Address:**

**FEI Number:** 65-0664650

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GYARMATHY, JAMES P  
13180 N. CLEVELAND AVE.  
SUITE 111  
N FT MYERS, FL 33903 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: DPST  
Name: GYARMATHY, JAMES P  
Address: 13180 N., CLEVELAND AVE. #111  
City-St-Zip: N FT MYERS, FL 33903

Title: V  
Name: POLVERARI, BONNIE  
Address: 13180 N. CLEVELAND AVE. 111  
City-St-Zip: FORT MYERS, FL 33903

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 GYARMATHY

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04/30/2012

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

\_\_\_\_\_  
Date