

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000034643

Entity Name: JOAN PLOSHNICK, P.A

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7208 DEMEDICI CIR  
DELRAY BEACH, FL 33446

**New Principal Place of Business:**

**Current Mailing Address:**

7208 DEMEDICI CIR  
DELRAY BEACH, FL 33446

**New Mailing Address:**

FEI Number: 65-0745429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PLOSHNICK, JOAN  
7208 DEMEDICI CIR  
DELRAY BEACH, FL 33446 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: PLOSHNICK, JOAN  
Address: 7208 DEMEDICI CIR  
City-St-Zip: DELRAY BEACH, FL 33446

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: JOAN PLOSHNICK

D

02/17/2011

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

\_\_\_\_\_  
Date