

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000087664

FILED
Apr 11, 2011
Secretary of State

Entity Name: BSASPB, P.A.

Current Principal Place of Business:

670 GLADES ROAD
SUITE 300
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

670 GLADES ROAD
SUITE 300
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 65-0785294 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPRINKLE, PHILLIP M II
PHILLIPS POINT EAST TOWER
777 SOUTH FLAGLER DR., STE. 900
WEST PALM BEACH, FL 33401 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: TD
Name: KLEIN, MATTHEW A
Address: 670 GLADES ROAD STE 300
City-St-Zip: BOCA RATON, FL 33431

Title: SD
Name: COLLETTA, JOSEPH A
Address: 670 GLADES RD , STE 300
City-St-Zip: BOCA RATON, FL 33431

Title: PD
Name: ROBINSON, GERALD N
Address: 670 GLADES ROAD , STE 300
City-St-Zip: BOCA RATON, FL 33431

Title: VP
Name: ROSS, ANDREW S
Address: 670 GLADES ROAD , STE 300
City-St-Zip: BOCA RATON, FL 33431

Title: VP
Name: BARRON, JAMES R
Address: 670 GLADES ROAD, STE. 300
City-St-Zip: BOCA RATON, FL 33431

Title: VP
Name: LIEBLER, FREDERICK B
Address: 670 GLADES ROAD, STE. 300
City-St-Zip: BOCA RATON, FL 33431

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: GERALD N ROBINSON

PD

04/11/2011

Electronic Signature of Signing Officer or Director

_____ Date