

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000003222

Entity Name: NAOMI S. KORN, LCSW, INC.

**FILED**  
**Mar 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

535 CENTRAL AVE  
STE 316  
ST PETERSBURG, FL 33701

**New Principal Place of Business:**

259 4TH AVENUE N  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

535 CENTRAL AVE  
STE 316  
ST PETERSBURG, FL 33701

**New Mailing Address:**

259 4TH AVENUE N  
ST PETERSBURG, FL 33701

FEI Number: 59-3488155

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KRODEL, WILLIAM H PA  
4437 CENTRAL AVE.  
ST PETERSBURG, FL 33713 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: PSTD  
Name: KORN, NAOMI S S  
Address: 2594TH AVENUE N  
City-St-Zip: ST PETERSBURG, FL 33701

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: NAOMI S. KORN

PRES

03/13/2011

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

\_\_\_\_\_  
Date