

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000053496

**FILED**  
**Feb 24, 2011**  
**Secretary of State**

**Entity Name:** THE LAW OFFICE OF MARY SPAGNOLA-HILLS, P.A.

**Current Principal Place of Business:**

736 DELAWARE AVENUE  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

6989 HANCOCK DRIVE  
PORT SAINT LUCIE, FL 34952

**Current Mailing Address:**

736 DELAWARE AVENUE  
FORT PIERCE, FL 34950

**New Mailing Address:**

PO BOX 14109  
FORT PIERCE, FL 34979

**FEI Number:** 65-0931942

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPAGNOLA-HILLS, MARY  
6005 CITRUS AVENUE  
FORT PIERCE, FL 34982 US

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

SPAGNOLA-HILLS, MARY  
6989 HANCOCK DRIVE  
PORT SAINT LUCIE, FL 34952 US

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:** MARY SPAGNOLA-HILLS

02/24/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** HILLS, MARY SPAGNOLA  
**Address:** 6989 HANCOCK DRIVE  
**City-St-Zip:** PORT SAINT LUCIE, FL 34952

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:** MARY SPAGNOLA-HILLS

P

02/24/2011

Electronic Signature of Signing Officer or Director

Date