

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000092505

**FILED**  
**Mar 18, 2012**  
**Secretary of State**

**Entity Name:** SUSAN C. JANNOU, D.P.M., P.A.

**Current Principal Place of Business:**

2420 NORTH TAMIAMI TRAIL  
SUITE A  
NOKOMIS, FL 34275

**New Principal Place of Business:**

2420 NORTH TAMIAMI TRAIL  
SUITE A  
NOKOMIS, FL 34275 UN

**Current Mailing Address:**

2420 NORTH TAMIAMI TRAIL  
SUITE A  
NOKOMIS, FL 34275

**New Mailing Address:**

2420 NORTH TAMIAMI TRAIL  
SUITE A  
NOKOMIS, FL 34275 UN

**FEI Number:** 65-0951406

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REEGLER, SARI LYNN  
1521 S. TAMIAMI TRAIL,STE.304  
VENICE, FL 34292 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: DR  
Name: JANNOU, SUSAN C D.P.M.  
Address: 2420 NORTH TAMIAMI TRAIL,STE.A  
City-St-Zip: NOKOMIS, FL 34275

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: SUSAN C JANNOU

DPM

03/18/2012

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

\_\_\_\_\_  
Date