

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S11589

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** ABBOTT AND SWAIN OF ST. AUGUSTINE, INC.

**Current Principal Place of Business:**

1093 A1A BEACH BLVD  
ST AUGUSTINE, FL 32080 US

**New Principal Place of Business:**

**Current Mailing Address:**

1093 A1A BEACH BLVD  
SAINT AUGUSTINE, FL 32080 US

**New Mailing Address:**

**FEI Number:** 59-3047985

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEPHENS, MALCOLM L., JR.  
NO. 10 CATHEDRAL PLACE  
(P.O. DRAWER  
ST. AUGUSTINE, FL 32085 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: S  
Name: SWAIN, JUANITA  
Address: 110 OCEAN HOLLOW  
City-St-Zip: ST AUGUSTINE, FL 32084

Title: P  
Name: ABBOTT, TIMOTHY C.  
Address: 160 LEGENDARY DRIVE # 208  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VP  
Name: SWAIN, GREG  
Address: 409 TANAGER RD  
City-St-Zip: ST. AUGUSTINE, FL 32086

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: TIMOTHY C. ABBOTT

PRES

04/23/2012

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

\_\_\_\_\_  
Date