

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S40198

FILED  
Feb 03, 2012  
Secretary of State

**Entity Name:** NORMA HAND BRILL, P.A.

**Current Principal Place of Business:**

164 PONDELLA ROAD  
NORTH FORT MYERS, FL 33903 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 3941  
NORTH FORT MYERS, FL 339183941 US

**New Mailing Address:**

FEI Number: 65-0252750

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRILL, NORMA HAND  
164 PONDELLA ROAD  
NORTH FORT MYERS, FL 33903 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: PSD  
Name: BRILL, NORMA HAND  
Address: 164 PONDELLA ROAD  
City-St-Zip: NO FT MYERS, FL 33903

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: NORMA HAND BRILL

PRES

02/03/2012

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

\_\_\_\_\_ Date