

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S55956

**Entity Name:** NORMAN L. SCHROEDER, II, P.A.

**FILED**  
**Jan 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6801 LAKE WORTH RD  
SUITE 120  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

6801 LAKE WORTH RD  
SUITE 120  
LAKE WORTH, FL 33467

**New Mailing Address:**

FEI Number: 65-0263669      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHROEDER NORMAN L  
6801 LAKE WORTH RD  
SUITE 120  
LAKE WORTH, FL 33467 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: P  
Name: SCHROEDER, NORMAN L.  
Address: 274 WRANGLE WOOD DR  
City-St-Zip: WEST PALM BEACH, FL 33414

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: NORMAN SCHROEDER II

Electronic Signature of Signing Officer or Director

P

01/26/2012

Date