

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V40531

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** MELINDA PENNEY GAMOT, P.A.

**Current Principal Place of Business:**

2701 PGA BLVD  
SUITE C  
PALM BEACH GARDENS, FL 33410 US

**New Principal Place of Business:**

**Current Mailing Address:**

2701 PGA BLVD  
SUITE C  
PALM BEACH GARDENS, FL 33410 US

**New Mailing Address:**

**FEI Number:** 65-0334368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAMOT, MELINDA PENNEY  
2701 PGA BLVD  
SUITE C  
PALM BEACH GARDENS, FL 33410 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: DPS  
Name: GAMOT, MELINDA PENNEY  
Address: 2701 PGA BLVD, SUITE C  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: T  
Name: GAMOT, MELINDA PENNEY  
Address: 2701 PGA BLVD SUITE C  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: MELINDA GAMOT

DPS

01/09/2012

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

\_\_\_\_\_  
Date