

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V60951

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** LAW OFFICES OF ROBERT J. ARNOLD, P.A.

**Current Principal Place of Business:**

20283 STATE ROAD SEVEN,  
SUITE 400  
BOCA RATON, FL 33431 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MEYERS & ASSOCIATE, CPA, PA  
SUITE 216  
PALM BEACH GARDENS, FL 33418 US

**New Mailing Address:**

**FEI Number:** 65-0353681

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARNOLD, ROBERT J.  
1900 NW CORPORATE BLVD  
STE. 400E  
BOCA RATON, FL 33431 US

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

ARNOLD, ROBERT J.  
20283 STATE ROAD SEVEN  
SUITE 400  
BOCA RATON, FL 33431 US

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:** ROBERT J ARNOLD

02/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DPVP  
**Name:** ARNOLD, ROBERT J.  
**Address:** 20283 STATE ROAD SEVEN, SUITE 400  
**City-St-Zip:** BOCA RATON, FL 33431

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:** ROBERT J ARNOLD

PRES

02/16/2011

Electronic Signature of Signing Officer or Director

Date