

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F26227

**Entity Name:** JAMES M. STARK, P.A.

**Current Principal Place of Business:**

524 S ANDREWS AVE  
#101N  
FT LAUDERDALE, FL 33301

**Current Mailing Address:**

524 S ANDREWS AVE  
#101N  
FT LAUDERDALE, FL 33301 US

**FEI Number:** 59-2084821

**Certificate of Status Desired:** No

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

STARK, JAMES M  
524 S ANDREWS AVE #101N  
FT LAUDERDALE, FL 33301 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name JAMES M. STARK, P.A.  
Address 524 S. ANDREWS AVE #101N  
City-State-Zip: FT LAUDERDALE FL 33301

Title ST  
Name JAMES M. STARK, P.A.  
Address 524 S. ANDREWS AVE #101N  
City-State-Zip: FT LAUDERDALE, FL 33301

Title V  
Name JAMES M. STARK, P.A.  
Address 524 S. ANDREWS AVE #101N  
City-State-Zip: FT LAUDERDALE, FL 33301

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:** JAMES M STARK

**PRESIDENT**

**03/20/2013**

Electronic Signature of Signing Officer/Director Detail

Date