

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H32818

Entity Name: JEAN C. COKER, P.A.

Current Principal Place of Business:

6622 SOUTHPOINT DRIVE SOUTH
SUITE #160
JACKSONVILLE, FL 32216

Current Mailing Address:

% JEAN C. COKER
6622 SOUTHPOINT DR. S., SUITE 160
JACKSONVILLE, FL 32216

FEI Number: 59-2467636

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COKER, JEAN C.
1118 HOLLY LANE
JACKSONVILLE, FL 32207 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 DPS
Name COKER, JEAN C.
Address 1118 HOLLY LANE
City-State-Zip: JACKSONVILLE FL 32207

Title AS
Name LEN, DIANA M
Address 2991 NORTH FIRST ST
City-State-Zip: ST. AUGUSTINE FL 32085

Title AST
Name COKER, ELIZABETH A
Address 1118 HOLLY LANE
City-State-Zip: JACKSONVILLE FL 32207

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: DIANA M. LEN

AS

02/13/2013

Electronic Signature of Signing Officer/Director Detail

_____ Date