

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000063707

Entity Name: JANET ELIZABETH HOFFMAN, P.A.**Current Principal Place of Business:**1805 WINDJAMMER LANE
SAINT AUGUSTINE, FL 32084**Current Mailing Address:**1805 WINDJAMMER LANE
SAINT AUGUSTINE, FL 32084 US**FEI Number:** 59-3286031**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOFFMAN, JANET E
1805 WINDJAMMER LANE
ST AUGUSTINE, FL 32084 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	P
Name	HOFFMAN, JANET E
Address	1805 WINDJAMMER LANE
City-State-Zip:	SAINT AUGUSTINE FL 32084

Title	ST
Name	CARILLI, JUNE G
Address	8429 ALDERMAN RD
City-State-Zip:	JACKSONVILLE FL 32211

Title	V
Name	HOFFMAN, KELLY M
Address	1805 WINDJAMMER LANE
City-State-Zip:	SAINT AUGUSTINE FL 32084

Title	V
Name	HOFFMAN, KATHRYN A
Address	1805 WINDJAMMER LANE
City-State-Zip:	SAINT AUGUSTINE FL 32084

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: JANET E. HOFFMAN**PRESIDENT****04/26/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date