

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S94887

Entity Name: HAMIC & SHIVERS, P.A., CPAS

Current Principal Place of Business:

4460 FL NATIONAL DR
LAKELAND, FL 33813

Current Mailing Address:

P.O. BOX 2597
LAKELAND, FL 33806 US

FEI Number: 59-3094420

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHIVERS, JEFFREY S
4460 FL NATIONAL DR
LAKELAND, FL 33813 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 SHIVERS, JEFFREY S.
Address 4460 FL NATIONAL DR
City-State-Zip: LAKELAND FL 33813

Title P
Name SHIVERS, LORI H
Address 4460 FL NATIONAL DR
City-State-Zip: LAKELAND FL 33813

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: LORI H SHIVERS

D

04/12/2013

Electronic Signature of Signing Officer/Director Detail

Date