

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J35779

FILED
Mar 17, 2011
Secretary of State

Entity Name: NICHOLAS YONCLAS, P.A.

Current Principal Place of Business:

19 ISLAND DR
EASTPOINT, FL 32328 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 386
EASTPOINT, FL 32328 US

New Mailing Address:

FEI Number: 59-2736651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YONCLAS, NICHOLAS
19 ISLAND DR
EASTPOINT, FL 32328 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PVT
Name: YONCLAS, NICHOLAS
Address: 19 ISLAND DRIVE
City-St-Zip: EASTPOINT, FL 32328

Title: S
Name: YONCLAS, BARBARA
Address: 19 ISLAND DRIVE
City-St-Zip: EASTPOINT, FL 32328

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: NICHOLAS YONCLAS

P

03/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date