

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J35779

**FILED
Apr 12, 2013
Secretary of State
CC1931675847**

Entity Name: NICHOLAS YONCLAS, P.A.

Current Principal Place of Business:

19 ISLAND DR
EASTPOINT, FL 32328

Current Mailing Address:

P.O. BOX 386
EASTPOINT, FL 32328 US

FEI Number: 59-2736651

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YONCLAS, NICHOLAS
19 ISLAND DR
EASTPOINT, FL 32328 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	PVT	Title	S
Name	YONCLAS, NICHOLAS	Name	YONCLAS, BARBARA
Address	19 ISLAND DRIVE	Address	19 ISLAND DRIVE
City-State-Zip:	EASTPOINT FL 32328	City-State-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

PRESIDENT

04/12/2013

Electronic Signature of Signing Officer/Director Detail

Date