

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H60884

FILED
Feb 17, 2010
Secretary of State

Entity Name: THOMAS D. TREECE, P.A.

Current Principal Place of Business:

4465 BAY MEADOWS RD.
STE. 2
JACKSONVILLE, FL 32217 US

Current Mailing Address:

% THOMAS D. TREECE
4316 KINCARDINE DR.
JACKSONVILLE, FL 32257

New Principal Place of Business:

4465 BAYMEADOWS RD.
STE. 2
JACKSONVILLE, FL 32217 US

New Mailing Address:

4465 BAYMEADOWS RD.
STE. 2
JACKSONVILLE, FL 32217 US

FEI Number: 59-2539261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TREECE, THOMAS D.
4316 KINCARDINE DR.
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

TREECE, THOMAS D
.4465 BAYMEADOWS RD.
2
JACKSONVILLE, FL 32217 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: THOMAS D. TREECE

02/17/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: TREECE, THOMAS D.
Address: 4316 KINCARDINE DR.
City-St-Zip: JACKSONVILLE, FL 32257 DU

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: THOMAS D. TREECE

PRES

02/17/2010

Electronic Signature of Signing Officer or Director

Date