

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H79327

FILED
Feb 06, 2010
Secretary of State

Entity Name: PATRICIA TRAPNELL, INC.

Current Principal Place of Business:

1061 E. INDIANTOWN ROAD
104
JUPITER, FL 33477 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 458
VICTOR, ID 83455 US

New Mailing Address:

FEI Number: 59-2581039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

S. BARRIE GODOWN, CPA, PA
1061 E. INDIANTOWN ROAD
104
JUPITER, FL 33477 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP
Name: CRAWFORD, PATRICIA T
Address: P.O. BOX 458
City-St-Zip: VICTOR, ID 83455 US

Title: VP
Name: CRAWFORD, CLETUS A
Address: P.O. BOX 458
City-St-Zip: VICTOR, ID 83455 US

Title: VP
Name: HALL, FREDERICK
Address: 1320 POINSETTA
City-St-Zip: PORT ST. LUCIE, FL 34952 US

Title: S
Name: CRAWFORD, PATRICIA T
Address: P.O. BOX 458
City-St-Zip: VICTOR, ID 83455 US

Title: T
Name: GODOWN, BARRIE
Address: 1061 E INDIANTOWN RD #104
City-St-Zip: JUPITER, FL 33477

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: S. BARRIE GODOWN

CPA

02/06/2010

Electronic Signature of Signing Officer or Director

Date