

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K34545

**FILED**  
**Jan 18, 2011**  
**Secretary of State**

**Entity Name:** THOMAS LUCIDO & ASSOCIATES, P.A.

**Current Principal Place of Business:**

C/O THOMAS P. LUCIDO  
701 SE OCEAN BLVD.  
STUART, FL 34994 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O THOMAS P. LUCIDO  
701 SE OCEAN BLVD  
STUART, FL 34994 US

**New Mailing Address:**

**FEI Number:** 65-0066650

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LUCIDO, THOMAS P  
701 SE OCEAN BLVD  
STUART, FL 34994 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: PDS  
Name: LUCIDO, THOMAS P  
Address: 701 SE OCEAN BLVD  
City-St-Zip: STUART, FL 34994

Title: TV  
Name: LUCIDO, THOMAS P  
Address: 701 SE OCEAN BLVD  
City-St-Zip: STUART, FL 34994

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 LUCIDO

PRES

01/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date