

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000103608

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** TOMMY'S PAINTING OF NORTH FLORIDA, INC.

**Current Principal Place of Business:**

167 SCOTTWOOD DRIVE  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

29 MONTCLAIR AVE  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

167 SCOTTWOOD DRIVE  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

29 MONTCLAIR AVE  
SANTA ROSA BEACH, FL 32459

**FEI Number:** 20-1379610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRAD CONGLETON CPA, INC  
50 UPTOWN GRAYTON CIRCLE  
15  
SANTA ROSA BEACH, FL 32459 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: P  
Name: JUHASZ, TAMAS  
Address: 29 MONTCLAIR AVE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: TAMAS JUHASZ

P

04/28/2012

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

\_\_\_\_\_  
Date