## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015416

Entity Name: THOMAS INCORVAIA, PA

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2034 RIDGE SPRING DRIVE 5144 NE 121ST ROAD THE VILLAGES, FL 32162 OXFORD, FL 34484

Current Mailing Address: New Mailing Address:

2034 RIDGE SPRING DRIVE 5144 NE 121ST ROAD THE VILLAGES, FL 32162 OXFORD, FL 34484

FEI Number: 20-2169690 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

INCORVAIA, THOMAS
2034 RIDGE SPRING DRIVE
THE VILLAGES, FL 32162 US
SINCORVAIA, THOMAS
5144 NE 121ST ROAD
OXFORD, FL 34484 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 INCORVAIA 04/27/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST () Delete Title: PVST (X) Change () Addition

 Name:
 INCORVAIA, THOMAS
 Name:
 INCORVAIA, THOMAS

 Address:
 2034 RIDGE SPRING DRIVE
 Address:
 5144 NE 121ST ROAD

 City-St-Zip:
 THE VILLAGES, FL 32162
 City-St-Zip:
 OXFORD, FL 34484

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS INCORVAIA PRES 04/27/2009