

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000015416

Entity Name: THOMAS INCORVAIA, PA

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5144 NE 121ST ROAD  
OXFORD, FL 34484

**New Principal Place of Business:**

**Current Mailing Address:**

5144 NE 121ST ROAD  
OXFORD, FL 34484

**New Mailing Address:**

FEI Number: 20-2169690

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INCORVAIA, THOMAS  
5144 NE 121ST ROAD  
OXFORD, FL 34484 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: PVST  
Name: INCORVAIA, THOMAS  
Address: 5144 NE 121ST ROAD  
City-St-Zip: OXFORD, FL 34484

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: TOM INCORVAIA

PRES

04/26/2011

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

\_\_\_\_\_  
Date