

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000049509

**FILED**  
**May 29, 2012**  
**Secretary of State**

**Entity Name:** FARRELL & ASSOCIATES DC, PA

**Current Principal Place of Business:**

6944 W. LINEBAUGH AVE  
STE 101  
TAMPA, FL 33625

**New Principal Place of Business:**

**Current Mailing Address:**

6944 W. LINEBAUGH AVE  
STE 101  
TAMPA, FL 33625

**New Mailing Address:**

**FEI Number:** 20-2603468

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FARRELL, THERESA  
10333 WILLOW LEAF TRL  
TAMPA, FL 33625 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: FARRELL, THERESA  
Address: 10333 WILLOW LEAF TRL  
City-St-Zip: TAMPA, FL 33625

Title: D  
Name: TROIANI, JOSEPH  
Address: 10333 WILLOW LEAF TRL  
City-St-Zip: TAMPA, FL 33625

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: JOSEPH TROIANI

VP

05/29/2012

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

\_\_\_\_\_  
Date