

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000081838

Entity Name: FLORIDA TAX TEAM, INC

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

4709 66TH STREET NORTH  
KENNETH CITY, FL 33709

## **New Principal Place of Business:**

## **Current Mailing Address:**

1337 VIEWTOP DRIVE  
CLEARWATER, FL 33764

## **New Mailing Address:**

FEI Number: 74-3180637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LLEWELLYN, MICHAEL  
1337 VIEWTOP DRIVE  
CLEARWATER, FL 33764 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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: LLEWELLYN, MICHAEL  
Address: 1337 VIEWTOP DRIVE  
City-St-Zip: CLEARWATER, FL 33764

Title: D  
Name: MCNAMARA, THOMAS  
Address: 1337 VIEWTOP DRIVE  
City-St-Zip: CLEARWATER, FL 33764

Title: S  
Name: THE TAX AUTHORITY  
Address: 1000 MAPLEWOOD DRIVE, SUITE 110  
City-St-Zip: MAPLE SHADE, NJ 08052

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: MICHAEL LLEWELLYN

P

02/17/2010

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

\_\_\_\_\_  
Date