

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000125319

**FILED**  
**Mar 15, 2010**  
**Secretary of State**

**Entity Name:** PRISCILLA THOMASEVICH, CPA, PA

**Current Principal Place of Business:**

8461 LAKE WORTH ROAD  
SUITE 156  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

8461 LAKE WORTH ROAD  
SUITE 120  
LAKE WORTH, FL 33467

**Current Mailing Address:**

8461 LAKE WORTH ROAD  
SUITE 156  
LAKE WORTH, FL 33467

**New Mailing Address:**

8461 LAKE WORTH ROAD  
SUITE 120  
LAKE WORTH, FL 33467

**FEI Number:** 20-3058362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMASEVICH, PRISCILLA C  
11201 LAUREL WALK RD  
WELLINGTON, FL 33449 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: THOMASEVICH, PRISCILLA C  
Address: 11201 LAUREL WALK RD  
City-St-Zip: WELLINGTON, FL 33449

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: PRISCILLA THOMASEVICH

PRES

03/15/2010

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

\_\_\_\_\_  
Date