

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000017780

Entity Name: TRACY NEGOSHIAN, INC.

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

215 49TH ST. S.  
ST. PETERSBURG, FL 33707 US

**New Principal Place of Business:**

**Current Mailing Address:**

215 49TH ST. S.  
ST. PETERSBURG, FL 33707 US

**New Mailing Address:**

FEI Number: 26-4337420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

AUVIL, JONATHAN L  
37837 MERIDIAN AVENUE  
SUITE 100  
DADE CITY, FL 33525 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/D  
Name: NEGOSHIAN, TRACY  
Address: 215 49TH ST. S.  
City-St-Zip: ST. PETERSBURG, FL 33707 US

Title: T/D  
Name: SMITH, THOMAS E  
Address: 11825 JUST-A-MERE LANE  
City-St-Zip: DADE CITY, FL 33525 US

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: TRACY NEGOSHIAN

PD

02/16/2011

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

\_\_\_\_\_  
Date