

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000054893

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** TAX PRACTITIONERS OF FLORIDA INC.

**Current Principal Place of Business:**

C/O TAX HELP, INC.  
1730 S. FEDERAL HWY STE. 260  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

1730 S. FEDERAL HWY  
STE. 260  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

C/O TAX HELP, INC.  
1730 S. FEDERAL HWY STE. 260  
DELRAY BEACH, FL 33483

**New Mailing Address:**

1730 S. FEDERAL HWY  
STE. 260  
DELRAY BEACH, FL 33483

**FEI Number:** 80-0619549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TREMBLAY, W.J.  
1730 S. FEDERAL HWY STE. 260  
DELRAY BEACH, FL 33483 US

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

TREMBLAY, W J  
1730 S. FEDERAL HWY STE. 260  
DELRAY BEACH, FL 33483 US

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: W.J. TREMBLAY

02/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: TREMBLAY, W. J  
Address: 350 S.W. 27TH AVE.  
City-St-Zip: DELRAY BEACH, FL 33445

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: W.J. TREMBLAY

PRES

02/21/2011

Electronic Signature of Signing Officer or Director

Date