

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000081399

**FILED**  
**May 02, 2012**  
**Secretary of State**

**Entity Name:** JONCZAK & ASSOCIATES, INC.

**Current Principal Place of Business:**

8222 S E ROYAL STREET  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

**Current Mailing Address:**

8222 S E ROYAL STREET  
HOBE SOUND, FL 33455

**New Mailing Address:**

**FEI Number:** 65-0454303

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAIUCCI, JOHN E  
C/O JOHN E MAIUCCI ATTORNEY AT LAW  
55 E OSCEOLA STREET SUITE 200  
STUART, FL 34994 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:** PRES  
**Name:** JONCZAK, THEODORE  
**Address:** 8222 SE ROYAL STREET  
**City-St-Zip:** HOBE SOUND, FL 33455

**Title:** VP  
**Name:** JONCZAK, HAZEL  
**Address:** 8222 SE ROYAL STREET  
**City-St-Zip:** HOBE SOUND, FL 33455

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:** THEODORE JONCZAK

PRES

05/02/2012

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

\_\_\_\_\_  
Date