

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000071481

FILED
Feb 24, 2011
Secretary of State

Entity Name: INGALLS ASSOCIATES, PA, CPAS

Current Principal Place of Business:

3495 FIFTH AVE N
ST PETERSBURG, FL 33713 US

New Principal Place of Business:

Current Mailing Address:

3495 FIFTH AVE N
ST PETERSBURG, FL 33713 US

New Mailing Address:

FEI Number: 59-3336559 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

INGALLS, CHESTER W
5914 SKIMMER POINT BLVD., SOUTH
GULFPORT, FL 33707 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: PVTs
Name: INGALLS, CHESTER W
Address: 5914 SKIMMER POINT BLVD. SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: D
Name: INGALLS, CHESTER W
Address: 5914 SKIMMER POINT BLVD. SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: VP
Name: SALVEGGI, ANDRA Z
Address: 6740 CROSSWINDS DR N STE L-2
City-St-Zip: ST. PETERSBURG, FL 33710

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: CHESTER W INGALLS

_____ Electronic Signature of Signing Officer or Director

PVTs

02/24/2011

_____ Date