

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000048243

Entity Name

THOMAS JAMES ZARECZNY AND ASSOCIATES, INC.



Principal Place of Business  
2712 WESTCHESTER DR N  
CLEARWATER, FL 33761

Mailing Address  
2712 WESTCHESTER DR N  
CLEARWATER, FL 33761



01182006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
69-3451190

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**8. Name and Address of Current Registered Agent**

ZARECZNY, THOMAS JAMES  
2712 WESTCHESTER DR N  
CLEARWATER, FL 33761

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**OFFICERS AND DIRECTORS**

CEOP  
ZARECZNY, THOMAS JAMES  
2712 WESTCHESTER DR N  
CLEARWATER, FL 33761

000000397331  
01/30/06-80044-021 150.00

**DO NOT WRITE  
IN THIS SPACE**

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/06

Date

727-560-8895

Daytime Phone #