

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000041360

Entity Name: STACIE A. SEGAL, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

2296 NW 62 DR
BOCA RATON, FL 33496

New Principal Place of Business:

5884 BARTRAM ST
BOCA RATON, FL 33433

Current Mailing Address:

2296 NW 62 DR
BOCA RATON, FL 33496

New Mailing Address:

5884 BARTRAM ST
BOCA RATON, FL 33433

FEI Number: 65-0923115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEGAL, STACIE A
2296 NW 62 DR
BOCA RATON, FL 33496 US

Name and Address of New Registered Agent:

SEGAL, STACIE A
5884 BARTRAM ST
BOCA RATON, FL 33433 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:

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SEGAL, STACIE A
Address: 2296 NW 62 DR
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SEGAL, STACIE A
Address: 5884 BARTRAM ST
City-St-Zip: BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STACIE A. SEGAL

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date