

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S76108

FILED
Apr 01, 2010
Secretary of State

Entity Name: PRITCHARDS AND ASSOCIATES, INC.

Current Principal Place of Business:

1802 S. PARROTT AVE.
OKEECHOBEE, FL 349746179 US

New Principal Place of Business:

Current Mailing Address:

1802 S. PARROTT AVE.
OKEECHOBEE, FL 349746179 US

New Mailing Address:

FEI Number: 65-0281145 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PRITCHARD, LOWELL H PD
1802 S. PARROTT AVE.
OKEECHOBEE, FL 349746179 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: PRITCHARD, LOWELL H PRES.
Address: 32801 NO U.S. 441
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: VD
Name: PRITCHARD, BRENDAN L VICE
Address: 10 NW 138TH ST
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: VD
Name: PRITCHARD, MARILYN L VICE
Address: 32801 NO U.S. 441
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: SD
Name: PRITCHARD, MICHELLE L SEC.
Address: 10 NW 138TH ST
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: TD
Name: MILLER, JEANETTE K
Address: 780 SW 85TH AVE
City-St-Zip: OKEECHOBEE, FL 34974 US

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: JEANETTE K. MILLER

TD

04/01/2010

Electronic Signature of Signing Officer or Director

_____ Date