



BA20250415388



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20250415388

Date Filed: 2/27/2025

B3480-1696 02/27/2025 2:11 PM Received by California Secretary of State

| | | | |
|---|---|---|-----------------|
| Entity Details | | | |
| Corporation Name | TRACEY HALL & ASSOCIATES, INC. | | |
| Entity No. | 6589474 | | |
| Formed In | CALIFORNIA | | |
| Street Address of Principal Office of Corporation | | | |
| Principal Address | 324 TRAILVIEW ROAD ENCINITAS, CA 92024 | | |
| Mailing Address of Corporation | | | |
| Mailing Address | 324 TRAILVIEW ROAD ENCINITAS, CA 92024 | | |
| Attention | | | |
| Street Address of California Office of Corporation | | | |
| Street Address of California Office | 324 TRAILVIEW ROAD ENCINITAS, CA 92024 | | |
| Officers | | | |
| Officer Name | Officer Address | Position(s) | |
| + TRACEY HALL | 324 TRAILVIEW ROAD ENCINITAS, CA 92024 | Chief Executive Officer, Chief Financial Officer, Secretary | |
| Additional Officers | | | |
| Officer Name | Officer Address | Position | Stated Position |
| None Entered | | | |
| Directors | | | |
| Director Name | Director Address | | |
| + TRACEY HALL | 324 TRAILVIEW ROAD ENCINITAS, CA 92024 | | |
| The number of vacancies on Board of Directors is: 0 | | | |
| Agent for Service of Process | | | |
| Agent Name | TRACEY HALL | | |
| Agent Address | 324 TRAILVIEW ROAD ENCINITAS, CA 92024 | | |
| Type of Business | | | |
| Type of Business | NURSING SERVICES | | |
| Email Notifications | | | |
| Opt-in Email Notifications | No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail. | | |
| Labor Judgment | | | |
| No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code. | | | |

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

DAVID YORK

Signature

02/27/2025

Date