

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 304456

Entity Name: TSI, INC.

FILED
May 04, 2007
Secretary of State

Current Principal Place of Business:

289 ST GEORGE ST.
SAINT AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

289 ST GEORGE ST.
SAINT AUGUSTINE, FL 32084

New Mailing Address:

27 SPRING HOLLOW CIRCLE
ASHEVILLE, NC 28805

FEI Number: 59-1118525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PILLMORE, WILLIAM JAMES
289 ST GEORGE ST
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

WILLIAM PILLMORE
289 ST GEORGE ST
SAINT AUGUSTINE, FL 32084 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: WM PILLMORE

05/04/2007

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: PILLMORE, WILLIAM J.,
Address: 289 ST GEORGE ST.
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VP () Delete
Name: PILLMORE, BOBBIE JO
Address: 289 ST. GEORGE ST.
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PILLMORE, WILLIAM J
Address: 27 SPRING HOLLOW CIRCLE
City-St-Zip: ASHEVILLE, NC 28805

Title: VP (X) Change () Addition
Name: PILLMORE, BOBBIE JO
Address: 27 SPRING HOLLOW CIRCLE
City-St-Zip: ASHEVILLE, NC 28805

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: WM PILLMORE

PRES

05/04/2007

Electronic Signature of Signing Officer or Director

Date