

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006071

FILED
Apr 02, 2009
Secretary of State

Entity Name: TELEFYNE INCORPORATED

Current Principal Place of Business:

13430 GULF BEACH HWY
#79
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

13430 GULF BEACH HWY
#79
PENSACOLA, FL 32507

New Mailing Address:

FEI Number: 63-1194114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TCS CORPORATE SERVICES, INC.
1406 HAYS STREET
TALLAHASSEE, FL 32301 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 () Delete
Name: BELLAS, JORGE
Address: 13430 GULF BEACH HWY #79
City-St-Zip: PENSACOLA, FL 32507

Title: V () Delete
Name: BELLAS, JORGE
Address: 13430 GULF BEACH HWY #79
City-St-Zip: PENSACOLA, FL 32507

Title: CHRM () Delete
Name: BELLAS, JORGE
Address: 13430 GULF BEACH HWY #79
City-St-Zip: PENSACOLA, FL 32507

Title: VSTD () Delete
Name: BELLAS, JORGE JR.
Address: 13430 GULF BEACH HWY #79
City-St-Zip: PENSACOLA, FL 32507

Title: VSTD () Delete
Name: BELLAS, JORGE
Address: 13430 GULF BEACH HWY #79
City-St-Zip: PENSACOLA, FL 32507

Title: STD () Delete
Name: BELLAS, JORGE
Address: 13430 GULF BEACH HWY #79
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JORGE BELLAS

_____ Electronic Signature of Signing Officer or Director

P

04/02/2009

_____ Date