


2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # L13419
1. Entity Name
TOTAL DYNAMIC BALANCE, INC.



Principal Place of Business: 1471 SW 30 AVE #7 DEERFIELD BEACH, FL 33442 US
Mailing Address: PO BOX 4187 DEERFIELD BCH, FL 33442 US

% B - / 0 - 5 6 6 6 6 6 6 F &

DO NOT WRITE IN THIS SPACE

01282005 No Chg-P CR2E034 (10/03)

4. FEI Number: 65-0150262 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JENISON, ERIC
1471 SW 30 AVE #7
DEERFIELD BEACH, FL 33442

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00
9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	JENISON, ERIC T.
STREET ADDRESS	1471 SW 30 AVE #7
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	VSD
NAME	JENISON, LINDA
STREET ADDRESS	1471 SW 30 AVE #7
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000217391
02/07/05-80022-014 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eric Jenison ERIC JENISON 2-3-05 954-425-0764
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #