2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000074532

Address:

City-St-Zip:

826 OAK STREET

ORLANDO, FL 32804 US

Entity Name: TAELOR VENTURE, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
826 OAK S		o or Business.	new i inivipal i lace	or Business.	
	D, FL 32804	US			
Current Mailing Address:			New Mailing Addres	ss:	
826 OAK S ORLANDO	STREET D, FL 32804	US			
FEI Number: 26-3146592 FEI Number Applied For ()		FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
TAYLOR, 826 OAK S ORLANDO		US			
	e named entity e of Florida.	submits this statement for the p	urpose of changing its register	ed office or registered agent, or both	
SIGNATUI					
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	PRES (TAYLOR, JAM 826 OAK STRI ORLANDO, FL	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (TAYLOR, JAM 826 OAK STRI ORLANDO, FL	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC (TAYLOR, JAM 826 OAK STR ORLANDO, FL	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TREA (TAYLOR, JAM 826 OAK STRI ORLANDO, FL	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DIR (TAYLOR, JAM) Delete ES	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JAMES M. TAYLOR OWNE 04/13/2009