## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P36769**

1. Entity Name

TANNER INDUSTRIES, INC.



FILED Apr 30, 2007 08:00 AM Secretary of State

Principal Place of Business

735 DAVISVILLE ROAD, THIRD FLOOR SOUTHAMPTON, PA 18966

Mailing Address

735 DAVISVILLE ROAD, THIRD FLOOR SOUTHAMPTON, PA 18966



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 23-2050034 Not Applicable

Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

CT CORPORATION SYSTEM

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

## DO NOT WRITE IN THIS SPACE

No Chg-P

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 Signature, typed or crimed name of registered agent and title (applicable. (NOTE: Registered Agent agridure required when renataling) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		\$5.00 May Be Added to Fees	000000741546 05/15/07-80033-014	150.00
10.	OFFICERS AND DIRE	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TANNER, STEPHEN B. 735 DAVISVILLE ROAD SOUTHAMPTON, PA 18966		·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TANNER, MARK 735 DAVISVILLE ROAD SOUTHAMPTON, PA 18966		DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HINDAWI, ERIC R. 735 DAVISVILLE ROAD SOUTHAMPTON, PA 18966					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TANNER,RAYMOND C. 735 DAVISVILLE ROAD SOUTHAMPTON, PA 18966		IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TANNER, GREG 735 DAVISVILLE ROAD SOUTHAMPTON, PA 18966					
TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: \_

IGNATURE AND TYPED OR PRINTED MAME OF RIGHING OFFICER OR DIRECT

4-25-0

215-322-1238

Daytime Phone #