

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 446047

Entity Name: TRI-SURE CORPORATION

FILED  
Feb 26, 2009  
Secretary of State

## Current Principal Place of Business:

709 PINE ROAD  
AUBURNDALE, FL 33823 US

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 653  
AUBURNDALE, FL 33823 US

## New Mailing Address:

FEI Number: 59-1498145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHAMBERS, JAMES H  
2024 ARIANA BLVD  
AUBURNDALE, FL 33823 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: P ( ) Delete  
Name: CHAMBERS, JASON T  
Address: P. O. BOX 231  
City-St-Zip: AUBURNDALE, FL 33823 US

Title: STD ( ) Delete  
Name: CHAMBERS, GLENDA M  
Address: 2024 LAKE ARIANA BLVD  
City-St-Zip: AUBURNDALE, FL 33823

Title: D ( ) Delete  
Name: CHAMBERS, JAMES H  
Address: 2024 LAKE ARIANA BLVD.  
City-St-Zip: AUBURNDALE, FL 33823

## 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:

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: GLENDA M. CHAMBERS

STD

02/26/2009

Electronic Signature of Signing Officer or Director

Date