

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 611157

FILED  
Jan 08, 2010  
Secretary of State

Entity Name: TNT HIDEAWAY, INC.

**Current Principal Place of Business:**

6527 COASTAL HWY.  
CRAWFORDVILLE, FL 32327 US

**New Principal Place of Business:**

**Current Mailing Address:**

6527 COASTAL HWY.  
CRAWFORDVILLE, FL 32327 US

**New Mailing Address:**

FEI Number: 59-1890487

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

YOUNGSTRAND, JACQUELINE  
6527 COASTAL HWY.  
CRAWFORDVILLE, FL 32327 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  
Name: BAKER, ROBERT L  
Address: 5090 COASTAL HWY  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: S  
Name: KOONTZ, NEIL  
Address: 32 E J STRINGER  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T  
Name: YOUNGSTRAND, JACQUELINE  
Address: 400 PINE LANE  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V  
Name: EVANS, STEPHANIE  
Address: 206 SINCLAIR RD  
City-St-Zip: TALLAHASSEE, FL 32312

I hereby 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 all other like empowered.

SIGNATURE: JACQUELINE YOUNGSTRAND

T

01/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date