

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 680160

Entity Name: TEDDER, INC.

FILED
Jul 05, 2007
Secretary of State

Current Principal Place of Business:

4825 GRIFFIN VIEW DR.
P.O. BOX 464
LADY LAKE, FL 32159

New Principal Place of Business:

4825 GRIFFIN VIEW DR.
LADY LAKE, FL 32159

Current Mailing Address:

4825 GRIFFIN VIEW DR.
P.O. BOX 464
LADY LAKE, FL 32159

New Mailing Address:

4825 GRIFFIN VIEW DR.
LADY LAKE, FL 32159

FEI Number: 59-2018713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEDDER, BOBBY W.
4825 GRIFFIN VIEW DR.
LADY LAKE, FL 32159 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TEDDER, BOBBY W DP
Address: 4825 GRIFFIN VIEW RD
City-St-Zip: LADY LAKE, FL 32159

Title: STD () Delete
Name: TEDDER, SHIRLEY A STD
Address: 4825 GRIFFIN VIEW RD
City-St-Zip: LADY LAKE, FL 32159

Title: DV () Delete
Name: TEDDER, JEFF L
Address: 1535 SMITTY ROAD
City-St-Zip: WEIRSDALE, FL 32195

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: SHIRLEY A. TEDDER

STD

07/05/2007

Electronic Signature of Signing Officer or Director

Date