

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 16, 2008  
Secretary of State**

DOCUMENT# 688562

Entity Name: TILLMARC, INC.

**Current Principal Place of Business:**

3037 BUCK RIDGE TRAIL  
P.O. BOX 885  
LOXAHATCHEE, FL 33470 US

**New Principal Place of Business:**

3037 BUCK RIDGE TRAIL  
LOXAHATCHEE, FL 33470 US

**Current Mailing Address:**

PO BOX 885  
LOXAHATCHEE, FL 33470 US

**New Mailing Address:**

3037 BUCK RIDGE TRAIL  
LOXAHATCHEE, FL 33470 US

FEI Number: 59-2023319      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PFERDEKREMPER, DR. TR  
3037 BUCK RIDGE TRAIL  
LOXAHATCHEE, FL 33470 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

**OFFICERS AND DIRECTORS:**

Title: TS ( ) Delete  
Name: PFERDEKAEMPER, GISEL, A  
Address: 3037 BUCKRIDGE TRAIL  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: PD ( ) Delete  
Name: PFERDEKAEMPER, HORST, -EWA  
Address: 3037 BUCK RIDGE TRAIL  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: PFERDEKAEMPER, GISEL, A  
Address: 3037 BUCKRIDGE TRAIL  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S (X) Change ( ) Addition  
Name: PFERDEKAEMPER, HORST, -EWA  
Address: 3037 BUCK RIDGE TRAIL  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: PT ( ) Change (X) Addition  
Name: NAVARRO, DAVID,  
Address: 3037 BUCK RIDGE TRAIL  
City-St-Zip: LOXAHATCHEE, FL 33470

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: HP

S

04/16/2008

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

\_\_\_\_\_  
Date