

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005946

FILED
Jan 04, 2005
Secretary of State

Entity Name: TOTALLY PRODUCTIVE GROUP, INC.

Current Principal Place of Business:

3309 SW 3RD LANE
CAPE CORAL, FL 33991 US

New Principal Place of Business:

Current Mailing Address:

3309 SW 3RD LANE
CAPE CORAL, FL 33991 US

New Mailing Address:

FEI Number: 35-2063832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEDERS, SHELLY L
3309 SW 3RD LANE
CAPE CORAL, FL 33991 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: PSTD () Delete
Name: TEDERS, SHELLY L
Address: 5611 NE 61ST AVE. RD
City-St-Zip: SILVER SPRINGS, FL 34488 US

Title: VD () Delete
Name: BHUPALAM, MAHESH
Address: 335 W MCMILLAN STREET APT 3
City-St-Zip: CINCINNATI, OH 45219 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: TEDERS, SHELLY L
Address: 3309 SW 3RD LANE
City-St-Zip: CAPE CORAL, FL 33991 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHELLY L. TEDERS

PRES

01/04/2005

Electronic Signature of Signing Officer or Director

Date