2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State
05-05-2006 90184 037 ***150.00

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1. Entity Name
TECHNOLOGY & MANAGEMENT DESIGN, INC.

60037164

Principal Place of Business	Mailing Address
31 WEST MAIN STREET LE ROY, NY 14482-0400	PO BOX 400 LE ROY, NY 14482-0400

03092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1446500
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DENTI, KEVIN A
821 5TH AVE. SOUTH SUITE 201
NAPLES, FL 34102

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DILLOW, TERRY
STREET ADDRESS	~~9 WOODWARD DRIVE~~ 9076 Shadow Glen Way
CITY-ST-ZIP	~~LE ROY, NY 14482~~ Ft. Myers, FL 33913
TITLE	S
NAME	DILLOW, PATRICIA
STREET ADDRESS	~~9 WOODWARD DRIVE~~ 9076 Shadow Glen Way
CITY-ST-ZIP	~~LE ROY, NY 14482~~ Ft. Myers, FL 33913
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with the exception of like empowered.

SIGNATURE: Terry M. Dillow Terry M. Dillow 5/1/06 585-768-7082
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #