## 2006 FOR PROFIT CORPORATION

## Apr 21, 2006 8:00 am Secretary of State ANNUAL REPORT 04-21-2006 90104 047 \*\*\*150.00 **DOCUMENT # F04000004188** TBI ÓVERSEAS HOLDINGS, INC. 40056478 Principal Place of Business Mailing Address 3222 RED CLEVELAND BOULEVARD 3222 RED CLEVELAND BOULEVARD SANFORD, FL 32773 SANFORD, FL 32773 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 01262006 Chg-P 4. FEI Number Applied For City & State City & State 65-1225275 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROBINSON, KEITH R Street Address (P.O. Box Number is Not Acceptable) 3222 RED CLEVELAND BLVD SANFORD, FL 32773 Zip Code City FL 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PASD Gouldthorpe, Larry D. 3222 Red Cleveland Bird. Change ☐ Delete TITLE ☐ Addition TITLE NAME GOULDTHORPE, LARRY D NAME 3222 RED CLEVELAND BOULEVARD STREET ADDRESS STREET ADDRESS Sanford CITY-ST-ZIP SANFORD, FL 32773 CITY-ST-ZIP 🗹 Change ☐ Delete TITLE Addition TITLE CLIFTON, ROGER C NAME NAME 3222 RED CLEVELAND BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP SANFORD, FL 32773 -OD TITLE Robinson R. Keith Blvd. Change ☐ Addition TITLE ☐ Delete ROBINSON, R. KEITH NAME NAME 3222 RED CLEVELAND BOULEVARD STREET ADDRESS STREET ADDRESS 32773 CITY-ST-ZIP SANFORD, FL 32773 CITY-ST-ZIP Delete Change X Addition TITI F TITLE

I hereby certify that the information supplied with this filling 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 all other like ampowered.

NAME

TITLE

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STREET ADDRESS

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CITY-ST-7IP

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Sanford

SIGNATURE:

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STREET ADDRESS

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STREET ADDRESS

CITY-ST-78P

CITY-ST-ZIP

CITY-ST-ZIE

BROOKS, KEITH M

SANFORD, FL 32773

PRICE, CAROLINE F

SANFORD, FL 32773

SANFORD, FL 32773

COOPER, SANDY

ATEC

3222 RED CLEVELAND BOULEVARD

3222 RED CLEVELAND BOULEVARD

3222 RED CLEVELAND BOULEVARD

SIGNATURE AND TYPED OR PRINTED NAME ORSIGNING OFFICER OR DIRECTOR

Change

☐ Change

Cleveland Blud.

**Addition** 

Addition

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