

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000004929

Entity Name: PDMA CORPORATION

FILED  
Apr 16, 2009  
Secretary of State

## Current Principal Place of Business:

5909-C HAMPTON OAKS PARKWAY  
TAMPA, FL 33610

## New Principal Place of Business:

## Current Mailing Address:

5909-C HAMPTON OAKS PARKWAY  
TAMPA, FL 33610

## New Mailing Address:

FEI Number: 59-3191224      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BAKER, FREDERICK W  
5909C HAMPTON OAKS PKWY  
TAMPA, FL 33610 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: CEOD ( ) Delete  
Name: LUKENS, RICHARD H. JR.  
Address: 841 LAKESHORE DR.  
City-St-Zip: INCLINE VILLAGE, NV

Title: VTD ( ) Delete  
Name: BAKER, FREDERICK W  
Address: 8303 TORRINGTON AVENUE  
City-St-Zip: TAMPA, FL 33647

Title: PD ( ) Delete  
Name: OWENS, TIMOTHY  
Address: 125 LAUREL TREE WAY  
City-St-Zip: BRANDON, FL 33511

Title: SEC ( ) Delete  
Name: PFISTER, TAMARA L  
Address: 602 E. ALEXANDER #1010  
City-St-Zip: PLANT CITY, FL 33563

Title: DIR ( ) Delete  
Name: LUKENS, INA  
Address: 841 LAKESHORE DR  
City-St-Zip: INCLINE VILLAGE, NV

## 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:

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: TAMARA L PFISTER

SEC

04/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date