

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000519

FILED  
Apr 19, 2007  
Secretary of State

Entity Name: TRITRONICS INTERNATIONAL OF FLORIDA INCORPORATED

**Current Principal Place of Business:**

1952 NW 93RD AVENUE  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

1306 CONTINENTAL DRIVE  
ABINGDON, MD 21009

**New Mailing Address:**

FEI Number: 52-1036590      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STOKES, PAUL M  
C/O KELLEY DRYE & WARREN  
201 SOUTH BISCAYNE BLVD SUITE 2400  
MIAMI, FL 33131 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: PD ( ) Delete  
Name: WILLIAMS, VIRGINIA L  
Address: 1306 CONTINENTAL DRIVE  
City-St-Zip: ABINGDON, MD 21009

Title: VTSD ( ) Delete  
Name: WAGNER, KIMBERLY L  
Address: 1603 ROLLING ROAD  
City-St-Zip: BEL AIR, MD 21014

Title: VD ( ) Delete  
Name: WILLIAMS, RANDY M  
Address: 1835 MIDSUMMER LANE  
City-St-Zip: JARRETTSVILLE, MD 21084

Title: D ( ) Delete  
Name: WILLIAMS, ROGER P SR  
Address: 1306 CONTINENTAL DRIVE  
City-St-Zip: ABINGDON, MD 21009

Title: VD ( ) Delete  
Name: SCARFF, JAMES J  
Address: 7 ZELDA CT.  
City-St-Zip: WHITE HALL, MD 21161

**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 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: KIMBERLY L WAGNER

VP

04/19/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date