

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90027 049 ***150.00

DOCUMENT # F98000000814

1. Entity Name
TAD PGS, INC.



Principal Place of Business
**1001 THIRD AVENUE WEST, STE. 460
BRADENTON, FL 34205**

Mailing Address
**175 BROAD HOLLOW
TAX DEPT.
MELVILLE, NY 11747 US**

50009752



01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
94-3289209

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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

**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
NAME
STREET ADDRESS
CITY - ST - ZIP
**PTD
KORSI, JAMES
1001 THIRD AVENUE, WEST, SUITE 460
BRADENTON, FL 34205**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**X VPD
DACEY, DENNIS J
1001 THIRD AVENUE WEST, SUITE 460
BRADENTON, FL 34205**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DC
TROSCH, DENNIS H
1001 THIRD AVENUE WEST, SUITE 460
BRADENTON, FL 34205**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
MANUEL, BRISKIN
1001 THIRD AVENUE WEST, SUITE 460
BRADENTON, FL 34205**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Secretary Wendy K. Harkins
1001 Third Avenue West
Bradenton, FL 34205**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis J. Dacey 03/24/06 941-746-4434

Date

Daytime Phone #