2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004198

Entity Name: T.D.I. INTERNATIONAL, INC.

FILED Mar 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 321 E OSCEOLA STREET STUART, FL 34994 **Current Mailing Address: New Mailing Address:** 321 E OSCEOLA STREET STUART, FL 34994 FEI Number: 38-3062491 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition Name: CORLETT, GEOFF Name: CORLETT, GEOFF 39555 ORCHARD HILL PLACE, SUITE 600 321 EAST OSCEOLA STREET Address: Address: City-St-Zip: NOVI, MI 48375 City-St-Zip: STUART, FL 34994 DΛ Title: Title: () Delete () Change () Addition Name: LICK, DAVID M Name: 232 S CAPITOL AVE Address: Address: LANSING, MI 48933 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition JACKSON, HEATHER JACKSON, HEATHER Name: Name: 321 OSCEOLA STREET 321 EAST OSCEOLA STREET Address: Address: City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994 Title: () Delete Title: (X) Change () Addition TATE, STEVEN M TATE, STEVEN M Name: Name: Address: 39555 ORCHARD HILL PLACE, SUITE 600 Address: 321 EAST OSCEOLA STREET City-St-Zip: NOVI. MI 48375 City-St-Zip: STUART, FL 34994 Title: Title: (X) Change () Addition () Delete HUGHES, DEBORAH HUGHES, DEBORAH Name: Name: 39555 ORCHARD HILL PLACE, SUITE 600 Address: 321 EAST OSCEOLA STREET Address: City-St-Zip: NOVI, MI 48375 City-St-Zip: STUART, FL 34994

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: DEBORAH HUGHES S 03/10/2006