

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G13749

FILED
Feb 10, 2009
Secretary of State

Entity Name: TOD-SIROD, INC.

Current Principal Place of Business:

C/O GENE M. PRANZO
60 E 42ND ST, 40TH ST 40TH FL
NEW YORK, NY 101650006 US

Current Mailing Address:

C/O GENE M. PRANZO
60 E 42ND ST, 40TH ST 40TH FL
NEW YORK, NY 101650006 US

New Principal Place of Business:

C/O GENE M. PRANZO
1020 CROSSPOINTE DR. , STE. 107
NAPLES,, FL 391100918 US

New Mailing Address:

C/O GENE M. PRANZO
1020 CROSSPOINTE DR. , STE 107
NAPLES, FL 391100918 US

FEI Number: 22-3724291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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: D () Delete
Name: PRANZO, GENE M,
Address: 60 E 42ND ST, 40TH FL
City-St-Zip: NEW YORK, NY 101650006

Title: PD () Delete
Name: TALFORD, DORIS K
Address: C/O GENE M. PRANZO 60 E 42 ND ST
City-St-Zip: NEW YORK, NY 101650006

Title: DVP () Delete
Name: TALFORD, RICHARD S.,
Address: C/O GENE M. PRANZO 60 E 42ND ST
City-St-Zip: NEW YORK, NY 101650006

Title: TS () Delete
Name: POTTER, CAROL
Address: C/O GENE M. PRANZO 60 E 42ND ST
City-St-Zip: NEW YORK, NY 101650006

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PRANZO, GENE M,
Address: 1020 CROSSPOINTE DR., STE 107
City-St-Zip: NAPLES, FL 391100918

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: GENE M. PRANZO

D

02/10/2009

Electronic Signature of Signing Officer or Director

_____ Date