

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H24319

FILED
Jan 15, 2009
Secretary of State

Entity Name: MICHAEL TITZE COMPANY, INC.

Current Principal Place of Business:

1906 BUFORD BLVD
STE A
TALLAHASSEE, FL 323084443 US

New Principal Place of Business:

Current Mailing Address:

1906 BUFORD BLVD
STE A
TALLAHASSEE, FL 323084443 US

New Mailing Address:

FEI Number: 59-2456535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TITZE, MICHAEL
4016 BOBBIN BROOK
TALLAHASSEE, FL 32312 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: P () Delete
Name: TITZE, MICHAEL,
Address: 4016 BOBBIN BROOK
City-St-Zip: TALLAHASSEE, FL

Title: VP () Delete
Name: TITZE, ELIZABETH
Address: 4016 BOBBIN BROOK
City-St-Zip: TALLAHASSEE, FL

Title: TS () Delete
Name: MOORE, ANNE
Address: 2112 DORAL DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: TITLE, CHRISTOPHER
Address: 4144 CASTLE GATE DR.
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: TITLE, MITCHELL G
Address: 3962 FORSYTHE PARK CT.
City-St-Zip: TALLAHASSEE, FL 32309

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: ANNE MOORE

TS

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date