

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H84152

Entity Name: T & R TAPPING SERVICE, INC.

FILED
Mar 27, 2009
Secretary of State

Current Principal Place of Business:

C/O THELMA L. PARKER
2464 SUNDERLAND ROAD
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

C/O THELMA L. PARKER
2464 SUNDERLAND ROAD
MAITLAND, FL 32751 US

New Mailing Address:

FEI Number: 59-2616022 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKER, THELMA L.
2464 SUNDERLAND RD.
MAITLAND, FL 32751 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: VD () Delete
Name: PARKER, SAMUEL L.,
Address: 2464 SUNDERLAND RD
City-St-Zip: MAITLAND, FL

Title: STD () Delete
Name: POTTER, SUSAN,
Address: 1716 CINNOMAN CIRCLE
City-St-Zip: CASSELBERRY, FL

Title: VP () Delete
Name: PARKER, SAMUEL F.,
Address: 2464 SUNDERLAND RD
City-St-Zip: MAITLAND, FL

Title: PD () Delete
Name: PARKER, THELMA L.,
Address: 2464 SUNDERLAND RD.
City-St-Zip: MAITLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: PARKER, SAMUEL L.,
Address: PO BOX 621164
City-St-Zip: OVIEDO, FL 32761-116 US

Title: STD (X) Change () Addition
Name: POTTER, SUSAN,
Address: 1716 CINNOMAN CIRCLE
City-St-Zip: CASSELBERRY, FL 32707 US

Title: VP (X) Change () Addition
Name: PARKER, ROBERT W.,
Address: 1171-A CALLE DEL REY
City-St-Zip: CASSELBERRY, FL 32707 US

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: THELMA L. PARKER

PRES

03/27/2009

Electronic Signature of Signing Officer or Director

_____ Date