## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J10342

Address:

City-St-Zip:

POB 715

LUTZ, FL 33549

Entity Name: TOTAL TAX ACCOUNTING, INC.

FILED Jan 13, 2009 Secretary of State

| Current P                                   | rincipal Plac  | e of Business:                 | New Principal Place of Business:            |  |  |
|---|--|--------------------------------|---|--|--|
| SUITE 112                                   | ALE MABEY<br>2<br>335497881                            |                                |   |  |  |
| Current Mailing Address:                    |  |                                | New Mailing Address:                        |  |  |
| PO BOX 8<br>LUTZ, FL                        | 881<br>335497881                                       |                                |   |  |  |
| FEI Number                                  | : 59-2701578   | FEI Number Applied For ( )     | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )          |  |
| Name and                                    | d Address of   | Current Registered Agent:      | Name and Address                            | of New Registered Agent:                   |  |
|   | LINDA K<br>RES VIEW DF<br>AKES, FL 346                 |                                |   |  |  |
|   | e named entity<br>e of Florida.                        | submits this statement for the | purpose of changing its register            | red office or registered agent, or both,   |  |
| SIGNATU                                     | RE:  |                                |   |  |  |
|   | Electro  | nic Signature of Registered Ag | ent   | Date                                       |  |
| Election Ca                                 | mpaign Financin  | g Trust Fund Contribution ( ). |   |  |  |
| OFFICERS AND DIRECTORS:                     |  |                                | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | PST (<br>HILL, J. MCGII<br>23233 CLUB V<br>LAND O LAKE | ILLA DR.                       | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                    |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D (<br>HILL, J. MCGII<br>23233 CLUB V<br>LAND O LAKE   | ILLA DR.                       | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                    |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | RUHLIG, LIND   | T VIEW DRIVE                   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                    |  |
| Title:<br>Name:                             | VPD (<br>HIXSON, BRU                                   | ) Delete<br>CE                 | Title:<br>Name:                             | ( ) Change ( ) Addition                    |  |

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.

Address:

City-St-Zip:

SIGNATURE: J MCGILL HILL PRES 01/13/2009