

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J49760

FILED
Apr 09, 2009
Secretary of State

Entity Name: TODD, INC.

Current Principal Place of Business:

3570 CONSUMER ST
STE 6
RIVIERA BEACH, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

3570 CONSUMER ST
STE 6
RIVIERA BEACH, FL 33404 US

New Mailing Address:

FEI Number: 59-2770270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOESBURG, TODD H
3640 N OCEAN DR APT PH-D
SINGER ISLAND, FL 33404 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: CPD () Delete
Name: DOESBURG, TODD H
Address: 3640 N OCEAN DR PH-D
City-St-Zip: SINGER ISLD, FL 33404

Title: SD () Delete
Name: CRUZ, SUE L
Address: 3640 N OCEAN DR PHD
City-St-Zip: SINGER ISLAND, FL 33404

Title: TD (X) Delete
Name: NEUMANN, JANET
Address: 1090 FAIRVIEW LANE
City-St-Zip: SINGER ISLAND, FL 33404

Title: VP (X) Delete
Name: MCCUTCHEON, MARY
Address: 1127 GREEN VISTA CIRCLE
City-St-Zip: APOPKA, FL 32712

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:

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: TODD H. DOESBURG

CPD

04/09/2009

Electronic Signature of Signing Officer or Director

_____ Date