

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K46380

FILED  
Apr 17, 2008  
Secretary of State

Entity Name: TRANS-FIX TRANSMISSION, INC.

**Current Principal Place of Business:**

1445 W KING ST  
COCOA, FL 32922

**New Principal Place of Business:**

**Current Mailing Address:**

1445 W KING ST  
COCOA, FL 32922

**New Mailing Address:**

FEI Number: 59-2916191

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHILDERS, BONNIE  
1445 W. KING ST  
COCOA, FL 32922 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: CHILDERS, DENNIS S.,  
Address: 1111 CONDADO DR  
City-St-Zip: ROCKLEDGE, FL

Title: ST ( ) Delete  
Name: CHILDERS, BONNIE,  
Address: 1111 CONDADO DR  
City-St-Zip: ROCKLEDGE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: BONNIE CHILDERS

ST

04/17/2008

Electronic Signature of Signing Officer or Director

Date