2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# K58750

Entity Name: TAB PROFESSIONAL BUSINESS DESIGNS, INC.

Current Principal Place of Business:

4081 EAST OLIVE ROAD
SUITE H
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

4081 EAST OLIVE ROAD
SUITE H
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 59-2925310 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLINARD, SHELBY L.
4081 E. OLIVE ROAD
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

CLINARD, SHELBY L.
4081 E. OLIVE ROAD
SUITE H
PENSACOLA, FL 32514 US

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: 04/27/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: CLINARD, JENNY
Address: 4081 E OLIVE RD STE H
City-St-Zip: PENSACOLA, FL 32514

Title: V ( ) Delete
Name: CLINARD, BRAD
Address: 4081 E OLIVE RD STE H
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete
Name: CLINARD, ALTON H
Address: 4081 E OLIVE RD STE H
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete
Name: CLINARD, SHELBY
Address: 4081 E OLIVE RD STE H
City-St-Zip: PENSACOLA, FL 32514

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: JENNY CLINARD P 04/27/2007
Electronic Signature of Signing Officer or Director — Date