

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K82032

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: TECHNICAL SURVEILLANCE SCIENCES, INC.

## Current Principal Place of Business:

% DEANNE L GENTILE  
9750 W SAMPLE ROAD, STE. A  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

% DEANNE L GENTILE  
10141 NW 53 STREET  
SUNRISE, FL 33351

## Current Mailing Address:

% DEANNE L GENTILE  
P O BOX 9323  
POMPANO BEACH, FL 33075

## New Mailing Address:

FEI Number: 65-0139140      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GENTILE, DEANNE L  
2940 SW 22ND AVE. #718  
DELRAY BEACH, FL 33445      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/T ( ) Delete  
Name: GENTILE, DEANNE L  
Address: 2940 SW 22 AVENUE #718  
City-St-Zip: DELRAY BCH, FL 33445

Title: D ( ) Delete  
Name: MCCOY, PEG  
Address: 2481 TWP ROAD, 169  
City-St-Zip: CARDINGTON, OH 43315

Title: V ( ) Delete  
Name: WIGGINS, LAURIE  
Address: 2213 E. HOGAN HOLLOW  
City-St-Zip: MARGATE, FL 33063

Title: D ( ) Delete  
Name: PATRICIA, PHILLIPS  
Address: P.O. BOX 823  
City-St-Zip: LITCHFIELD,, AZ 85340

## 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: LAURIE J WIGGINS

V

01/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date