

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L58809

FILED  
Apr 14, 2008  
Secretary of State

Entity Name: TODD SPREADER SERVICE, INC.

**Current Principal Place of Business:**

3200 CR 64 EAST  
AVON PARK, FL 33825 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 905  
AVON PARK, FL 33825 US

**New Mailing Address:**

FEI Number: 59-3003813      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TODD, ROGER, SR.  
3200 CR 64 EAST  
AVON PARK, FL 33825 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: TODD, ROGER SR  
Address: 3200 CR 64 E  
City-St-Zip: AVON PARK, FL 33825

Title: VPS ( ) Delete  
Name: TODD, JEAN B  
Address: 3200 CR 64 EAST  
City-St-Zip: AVON PARK, FL 33825

**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: JEAN B TODD

VP

04/14/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date