

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004093

FILED
Apr 26, 2009
Secretary of State

Entity Name: TEAM OF PROFESSIONAL INTERNET ENTREPRENEURS, INC.

Current Principal Place of Business:

1763 PRAIRIE VIEW LANE
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

TOPIE
3300 HARRISON AVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-3654478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRASAD, GURU
1763 PRAIRIE VIEW LANE
OVIEDO, FL 32765 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PRASAD, GURU
Address: 1763 PRAIRIE VIEW LANE
City-St-Zip: OVIEDO, FL 32765

Title: T () Delete
Name: WETTER, ROGER A
Address: 3300 HARRISON AVE
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: MCALPIN, MIKE A
Address: P.O. BOX 2408
City-St-Zip: ORLANDO, FL 32804

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER WETTER

T

04/26/2009

Electronic Signature of Signing Officer or Director

Date