

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006690

FILED  
Feb 11, 2012  
Secretary of State

**Entity Name:** TELECOMMUNICATION CERTIFICATION BODY COUNCIL, INC.

**Current Principal Place of Business:**

849 NW S.R. 45  
NEWBERRY, FL 32669

**New Principal Place of Business:**

**Current Mailing Address:**

3040 CARLEE RUN CT.  
ELLICOTT CITY, MD 21042

**New Mailing Address:**

**FEI Number:** 06-1712558

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANDERS, S. SIDNEY  
849 NW S.R. 45  
NEWBERRY, FL 32669 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: CHAI  
Name: BRIGGS, MARK  
Address: 47173 BENICIA STREET  
City-St-Zip: FREMONT, CA 94538 US

Title: VICE  
Name: HURST, GORDON  
Address: 440 BOULDER COURT  
City-St-Zip: PLEASANTON, CA 94566 US

Title: TREA  
Name: SPRINGER, KAREN  
Address: 3356 NORTH SAN MARCOS PLACE #107  
City-St-Zip: CHANDLER, AZ 85225 US

Title: DIR  
Name: HARVEY, CHRIS R  
Address: 3040 CARLEE RUN CT.  
City-St-Zip: ELLICOTT CITY, MD 21042 US

I hereby 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 all other like empowered.

SIGNATURE: CHRIS HARVEY

DIR

02/11/2012

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

\_\_\_\_\_  
Date