## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006110

FILED Apr 18, 2007 Secretary of State

Entity Name: TEAM THRUST FOR THE NATION'S INTERNATIONAL, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1003 PRINCETON DRIVE 2220 CLUSTER OAK DR CLERMONT, FL 34712 CLERMONT, FL 34711 **Current Mailing Address: New Mailing Address:** 1003 PRINCETON DRIVE PO BOX 120942 CLERMONT, FL 34712 CLERMONT, FL 34712 FEI Number: 20-4787816 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CUNNINGHAM, KEVIN DR. CUNNINGHAM, KEVIN DR. 1003 PRINCETON DRIVE 1003 PRINCETON DRIVE CLERMONT, FL 34712 CLERMONT, FL 34711 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: 04/18/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete ( ) Change (X) Addition CUNNINGHAM, KEVIN E Name: Name: Address: Address: PO BOX 120942 CLERMONT, FL 34712 US City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition ( ) Delete CUNNINGHAM, DEBBIE J Name: Name: Address: Address: PO BOX 120942 City-St-Zip: City-St-Zip: CLERMONT, FL 34712 US Title: () Delete Title: ( ) Change (X) Addition CUNNINGHAM, CHAD C Name: Name: 1003 PRINCETON DR Address: Address: City-St-Zip: City-St-Zip: CLERMONT, FL 34711 US Title: () Delete Title: DIR ( ) Change (X) Addition Name: Name: LMILLER, LES J Address: Address: 7797 RIDGE RD City-St-Zip: City-St-Zip: FREDERICKTOWN, OH 43019 US Title: () Delete Title: ( ) Change (X) Addition YESKE, WILMA J Name: Name: 20044 N US HGHWY 24 Address: Address: City-St-Zip: City-St-Zip: CANTON, IL 61520 US Title: () Delete Title: ( ) Change (X) Addition YOUNG, DAWN Name: Name: Address: Address: 32625 1360 NORTH AVE SPRING VALLEY, IL 61362 US City-St-Zip: City-St-Zip: I hereby certify that the information supplied with this filing does not qualify for the 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: DR KEVIN E CUNNINGHAM PRES 04/18/2007