2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2009
Secretary of State

DOCUMENT# N06000006584

Entity Name: TCARTER CONNECTION INC

Current Principal Place of Business:

103 KENSINGTON WAY
ROTAL PALM BEACH, FL 33414

New Principal Place of Business:

103 KENSINGTON WAY
ROYAL PALM BEACH, FL 33414

Current Mailing Address:

103 KENSINGTON WAY
ROTAL PALM BEACH, FL 33414

New Mailing Address:

103 KENSINGTON WAY
ROYAL PALM BEACH, FL 33414

FEI Number: 51-0586822 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CARTER, TYRONE M
103 KENSINGTON WAY
ROYAL PALM BEACH, FL 33414 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: P ( ) Delete
Name: CARTER, TYRONE M
Address: 103 KENSINGTON WAY
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: VP ( ) Delete
Name: CARTER, APRIL D
Address: 103 KENSINGTON WAY
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: AVP ( ) Delete
Name: CARTER, MICHEAL
Address: 212 NW 10TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

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: APRIL CARTER VP 05/27/2009
Electronic Signature of Signing Officer or Director — Date