

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006908

FILED
Apr 29, 2009
Secretary of State

Entity Name: TRANSCENDENT SPIRITUAL DEVELOPMENT, INC.

Current Principal Place of Business:

20 W. LUCERNE CIRCLE
APT. # 905
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

20 W. LUCERNE CIRCLE
APT. # 905
ORLANDO, FL 32801 US

New Mailing Address:

1310 S GRAMERCY PLACE
SUITE 7
LOS ANGELES, CA 90019 US

FEI Number: 26-3082812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, JONATHAN D
20 W. LUCERNE CIRCLE
APT. #905
ORLANDO, FL 32801 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: VP () Delete
Name: AMIN, SHEEL M
Address: 6703 BRITTANY CHASE COURT
City-St-Zip: ORLANDO, FL 32810 US

Title: VP () Delete
Name: BAILEY, SEAN A
Address: 22 WEST WINTER PARK ST.
City-St-Zip: ORLANDO, FL 32804 FL

Title: VP () Delete
Name: CHRISTY, BRENT J
Address: 6515B HIDDENWALK DR.
City-St-Zip: WINTER PARK, FL 32792 FL

Title: VP () Delete
Name: STOWELL, JUSTIN C
Address: 410 WEST KING STREET
City-St-Zip: ORLANDO, FL 32804 US

Title: VP () Delete
Name: THOMAS, CHRISTOPHER D
Address: 20 W. LUCERNE CIRCLE APT. #905
City-St-Zip: ORLANDO, FL 32801 US

Title: VP () Delete
Name: WEISSING, CHARLES L
Address: 20 W. LUCERNE CIRCLE APT. #905
City-St-Zip: ORLANDO, FL 32801 US

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:

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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: JONATHAN ADAMS

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date