

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22047

FILED
Jan 23, 2009
Secretary of State

Entity Name: THIRD PARTY REGISTRATIONS, INC.

Current Principal Place of Business:

800 TRAFALGAR
SUITE 200
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 948153
MAITLAND, FL 32794

New Mailing Address:

FEI Number: 59-2840325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOTTS, DANIEL A
800 TRAFALGAR COURT
SUITE 200
MAITLAND, FL 32751 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: BOTTS, DANIEL A
Address: 800 TRAFALGAR COURT, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: T () Delete
Name: HAIR, ALAN E
Address: 800 TRAFALGAR COURT, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: CARRAWAY, MAC
Address: 800 TRAFALGAR CT., SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: S () Delete
Name: AERTS, MICHAEL J
Address: 800 TRAFALGAR COURTS, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: CD () Delete
Name: BEASLEY, LARRY E
Address: 1975 W STATE ROAD. 426
City-St-Zip: OVIEDO, FL

Title: VP () Delete
Name: JOHNSON, ROBERT R
Address: P.O. BOX 867
City-St-Zip: MOUNT DORA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CARRAWAY, MAC
Address: 4715 LORRAINE ROAD
City-St-Zip: BRADENTON, FL 34211

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: BEASLEY, LARRY E
Address: 1975 W STATE ROAD. 426
City-St-Zip: OVIEDO, FL 32765

Title: VP (X) Change () Addition
Name: JOHNSON, ROBERT R
Address: P.O. BOX 867
City-St-Zip: MOUNT DORA, FL 32756

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: DANIEL A. BOTTS

P

01/23/2009

Electronic Signature of Signing Officer or Director

Date