

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003065

FILED
Jan 16, 2007
Secretary of State

Entity Name: TRACKING & CADAVER RECOVERY, INC.

Current Principal Place of Business:

108 SOUTH MELANIE LANE
BRANDON, FL 33510

New Principal Place of Business:

Current Mailing Address:

108 SOUTH MELANIE LANE
BRANDON, FL 33510

New Mailing Address:

FEI Number: 59-3631497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANBORN, TANYA
108 SOUTH MELANIE LANE
BRANDON, FL 33510 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: D () Delete
Name: SANBORN, TANYA
Address: 108 S MELANIE LANE
City-St-Zip: BRANDON, FL 33510

Title: D () Delete
Name: PIERCE, JOHN ALLEN
Address: 1405 SHELL FLOWER LANE
City-St-Zip: BRANDON, FL 33511

Title: T () Delete
Name: FENNELL, SUSAN
Address: 7166 118TH STREET
City-St-Zip: SEMINOLE, FL 34642

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 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: TANYA SANBORN

D

01/16/2007

Electronic Signature of Signing Officer or Director

Date