

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023061

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: TALMAR MANAGEMENT, INC.

## Current Principal Place of Business:

16143 HARBAR OAKS DRIVE  
MONTVERDE, FL 34756 US

## New Principal Place of Business:

## Current Mailing Address:

16143 HARBAR OAKS DRIVE  
MONTVERDE, FL 34756 US

## New Mailing Address:

FEI Number: 59-3630757      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIS, TALMON E  
16143 HARBAR OAKS DRIVE  
MONTVERDE, FL 34756 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: DAVIS, TALMON E  
Address: 16143 HARBAR OAKS DRIVE  
City-St-Zip: MONTVERDE, FL 34756 US

Title: S/D ( ) Delete  
Name: DAVIS, MARTHA S  
Address: 16143 HARBAR OAKS DRIVE  
City-St-Zip: MONTVERDE, FL 34756 US

Title: VP/D ( ) Delete  
Name: DAVIS, JOHN T  
Address: 805 AVENUE H EAST SUITE 508  
City-St-Zip: ARLINGTON, TX 76011 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP/D (X) Change ( ) Addition  
Name: DAVIS, JOHN T  
Address: 171 TRAILING OAK DRIVE  
City-St-Zip: DOUBLE OAK,, TX 75077 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TALMON E. DAVIS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

02/17/2009

\_\_\_\_\_  
Date