

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000063306

1. Entity Name
TOUCHPOLL, INC.



Principal Place of Business
174 W COMSTOCK AVENUE
SUITE 108
WINTER PARK, FL 32789

Mailing Address
174 W COMSTOCK AVENUE
SUITE 108
WINTER PARK, FL 32789

FILED
Sep 05, 2008 08:00 AM
Secretary of State



09032008 No Chg-P CR2E034 (11/05)

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4. FEI Number
59-3679061

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

LOUDERMILK, ALTON C
700 MELROSE AVE B-2
WINTER PARK, FL 32789

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

000000359184
09/05/08-80007-014 550.00

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	LOUDERMILK, ALTON C
STREET ADDRESS	774 700 MELROSE AVE B-2
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	V
NAME	CRAWFORD, JASON
STREET ADDRESS	9551 MYRTLE CREEK LANE
CITY-ST-ZIP	ORLANDO, FL 32832
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Sept. 2, 2008 407-647-7655