

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000063809

Entity Name: TCLM, INC.

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7555 SO US HWY 1  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

7555 SO US HWY 1  
TITUSVILLE, FL 32780

**New Mailing Address:**

FEI Number: 59-3657022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MILLER, THOMAS D  
4835 ANCONA RD  
COCOA, FL 32927 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  
Name: MILLER, THOMAS  
Address: 4835 ANCONA RD  
City-St-Zip: COCOA, FL 32927

Title: V  
Name: MILLER, CATHY  
Address: 4835 ANCONA RD  
City-St-Zip: COCOA, FL 32927

I hereby 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 all other like empowered.

SIGNATURE: CATHY MILLER

VP

04/05/2011

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

\_\_\_\_\_  
Date