## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000007750

Entity Name: TRD CONSULTING, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ERNESS DR. GUSTINE, FL	32092			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ERNESS DR. GUSTINE, FL	32092			
FEI Number	: 59-3694232	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
1073 INVÉ	ROSEMARY RNESS DR. GUSTINE, FL	32092 US			
	e named entity e of Florida.	submits this statement for the	ne purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered	Agent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DEMUYT, ROS 1073 INVERNI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DEMUYT, ROS 1073 INVERNI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: Citv-St-Zip:	DEMUYT, THO 1073 INVERNI		Title: Name: Address: Citv-St-Zip:	( ) Change ( ) Addition	

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: ROSEMARY DEMUYT P 04/27/2009