## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000120644

Entity Name: TIDOR, INC.

FILED Mar 09, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4620 SUNBEAM STATION CT JACKSONVILLE, FL 32257 **Current Mailing Address: New Mailing Address:** 4620 SUNBEAM STATION CT JACKSONVILLE, FL 32257 FEI Number: 04-3684113 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PITTMAN, DORINDA GEANS, DORINDA 4620 SUNBEAM STATION COURT 4620 SÚNBEAM STATION COURT JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257 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: DORINDA K. GEANS 03/09/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition PITTMAN, DORINDA GEANS, DORINDA Name: Name: 4620 SUNBEAM STATION CT 4620 SUNBEAM STATION CT Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32257 Title: (X) Delete Title: () Change () Addition Name: PITTMAN, TITUS Name: 4620 SUNBEAM STATION CT Address: Address: JACKSONVILLE, FL 32257 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition GEAUS, PHYILLIS Name: Name: 2120 WILDFLOWER LN. Address: Address: City-St-Zip: BEAMONT, TX City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DORINDA K. GEANS D 03/09/2005