

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000024060

Entity Name: TFI MANAGEMENT, INC.

**FILED**  
**Jan 31, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

511 BAYSHORE DRIVE UNIT 711  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

511 BAYSHORE DRIVE UNIT 711  
FORT LAUDERDALE, FL 33304

**New Mailing Address:**

FEI Number: 03-0412561

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KIRKPATRICK, CAROL A  
511 BAYSHORE DRIVE UNIT 711  
FORT LAUDERDALE, FL 33304 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: PTD  
Name: KIRKPATRICK, JOSEPH E  
Address: 511 BAYSHORE DRIVE UNIT 711  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VSD  
Name: KIRKPATRICK, CAROL A  
Address: 511 BAYSHORE DRIVE UNIT 711  
City-St-Zip: FORT LAUDERDALE, FL 33304

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: JOSEPH E KIRKPATRICK

PTD

01/31/2012

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

\_\_\_\_\_  
Date