

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000029914

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: TOMER, INC.

## Current Principal Place of Business:

1000 WEST SKYVIEW LANDINGS DRIVE  
HERNANDO, FL 34442

## New Principal Place of Business:

1000 WEST SKYVIEW LANDINGS DRIVE  
HERNANDO, FL 34442 US

## Current Mailing Address:

1000 WEST SKYVIEW LANDINGS DRIVE  
HERNANDO, FL 34442

## New Mailing Address:

1000 WEST SKYVIEW LANDINGS DRIVE  
HERNANDO, FL 34442 US

FEI Number: 04-3626088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TOMER, FELICE H  
1000 WEST SKYVIEW LANDINGS DRIVE  
HERNANDO, FL 34442 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TOMER, FELICE H  
Address: 227 ELLA AVENUE  
City-St-Zip: INVERNESS, FL 34450

Title: VP ( ) Delete  
Name: TOMER, DAVID  
Address: 227 ELLA AVENUE  
City-St-Zip: INVERNESS, FL 34450

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: TOMER, FELICE H  
Address: 1000 WEST SKYVIEW LANDINGS DR  
City-St-Zip: HERNANDO, FL 34442 US

Title: VP (X) Change ( ) Addition  
Name: TOMER, DAVID A  
Address: 1000 WEST SKYVIEW LANDINGS DR  
City-St-Zip: HERNANDO, FL 34442 US

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: FELICE H. TOMER

P

04/28/2008

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

\_\_\_\_\_ Date