## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000078144

Entity Name: TREASURECOM FINANCIAL HOLDINGS, INC.

FILED Apr 12, 2007 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

1492 WOODCREST RD N

SUITE 506 WEST PALM BEACH, FL 33401

**Current Mailing Address:** 

New Mailing Address:

WEST PALM BEACH, FL 33417

224 DATURA STREET P O BOX 2845 SUITE 506 SUITE 506

SUITE 506 SUITE 506 WEST PALM BEACH, FL 33401 SUITE 506 KENNESAW, GA 30156

FEI Number: 02-0633480 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:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: TREASURE, MICHAEL Name: TREASURE, MICHAEL

 Address:
 224 DATURA STREET, SUITE 506
 Address:
 P O BOX 2845

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:
 KENNESAW, GA 30156

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 MAINA, MOSES
 Name:
 MAINA, MOSES

 Address:
 224 DATURA STEET, SUITE 506
 Address:
 P O BOX 2845

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:
 KENNESAW, FL 30156

Title: TD () Delete Title: TD (X) Change () Addition

Name: KINNEY TREASURE, STACEE L Name: KINNEY TREASURE, STACEE L Address: 224 DATUR A STREET, SUITE 506 Address: P O BOX 2845

Address: 224 DATUR A STREET, SUITE 506 Address: P O BOX 2845
City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: KENNESAW, FL 30156

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL TREASURE PD 04/12/2007