## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000078521

Entity Name: T & B HEATH CORPORATION

FILED Mar 14, 2007 Secretary of State

Elluty Name. TABH	LATITOON ONAHON			
Current Principal Place of Business:		New Principal Place of Business:		
150 COCONUT DR STI INDIALANTIC, FL 3290				
Current Mailing Address:		New Mailing Address:		
150 COCONUT DR STI INDIALANTIC, FL 3290				
FEI Number: 01-0735951	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
THE TORPY GROUP, I 202 N HARBOR CITY E MELBOURNE, FL 3293	BLVD STE 200			
The above named entity in the State of Florida.	$\gamma$ submits this statement for the $\wp$	ourpose of changing its registered	d office or registered agent, or both,	
0.00.00				
SIGNATURE:				

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition Title: ( ) Delete PINGSTON, HARRY J JR. WRIGHT, ANDREW Name: Name: 1177 CARISSA PLACE Address: Address: 150 COCONUT DRIVE STE 103 City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: INDIALANTIC, FL 32903

Title: VSTD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WRIGHT, ANDREW
 Name:

 Address:
 150 COCONUT DRIVE STE 103
 Address:

 City-St-Zip:
 INDIALANTIC, FL 32903
 City-St-Zip:

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: ANDREW WRIGHT P 03/14/2007