2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2007
Secretary of State

DOCUMENT# P02000112533

Entity Name: TEAK EXPERIENCE, CO.

Current Principal Place of Business:

27200 RIVERVIEW CENTER BLVD
103
BONITA SRINGS, FL 34134

New Principal Place of Business:

24850 S. TAMIAMI TRAIL
SUITE 3&4
BONITA SRINGS, FL 34134

Current Mailing Address:

27200 RIVERVIEW CENTER BLVD
103
BONITA SRINGS, FL 34134

New Mailing Address:

24850 S. TAMIAMI TRAIL
SUITE 3 & 4
BONITA SRINGS, FL 34134

FEI Number: 14-1853433 **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:

THOMAS, SUZANNE H
12259 TOSCANA WAY
#101
BONITA SPRING, FL 34135 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: SUZANNE H THOMAS 04/07/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: THOMAS, SUZANNE H
Address: 12259 TOSCANA WAY #101
City-St-Zip: BONITA SPRINGS, FL 34135

Title: V ( ) Delete
Name: THOMAS, RICHARDS C
Address: 12259 TOSCANA WAY #101
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S ( ) Delete
Name: THOMAS, MARIE H
Address: 12259 TOSCANA WAY #101
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: SUZANNE H THOMAS DP 04/07/2007
Electronic Signature of Signing Officer or Director Date