

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026536

Entity Name: TVS DISTRIBUTING, INC.

FILED  
Feb 04, 2008  
Secretary of State

## Current Principal Place of Business:

2802 FERN LANE  
DELTONA, FL 32738

## New Principal Place of Business:

1065 PEARL TREE CT.  
DELTONA, FL 32725

## Current Mailing Address:

2802 FERN LANE  
DELTONA, FL 32738

## New Mailing Address:

1065 PEARL TREE CT.  
DELTONA, FL 32725

FEI Number: 30-0167379

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STOLLER, THOMAS V  
2802 FERN LANE  
DELTONA, FL 32738 US

## Name and Address of New Registered Agent:

STOLLER, THOMAS V  
1065 PEARL TREE CT.  
DELTONA, FL 32725 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: THOMAS V. STOLLER

02/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STOLLER, THOMAS V  
Address: 2802 FERN LANE  
City-St-Zip: DELTONA, FL 32738

Title: CP ( ) Delete  
Name: STOLLER, THOMAS V  
Address: 2802 FERN LANE  
City-St-Zip: DELTONA, FL 32738

Title: TS ( ) Delete  
Name: STOLLER, THOMAS V  
Address: 2802 FERN LANE  
City-St-Zip: DELTONA, FL 32738

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: STOLLER, THOMAS V  
Address: 1065 PEARL TREE CT.  
City-St-Zip: DELTONA, FL 32725

Title: CP (X) Change ( ) Addition  
Name: STOLLER, THOMAS V  
Address: 1065 PEARL TREE CT.  
City-St-Zip: DELTONA, FL 32725

Title: TS (X) Change ( ) Addition  
Name: STOLLER, THOMAS V  
Address: 1065 PEARL TREE CT.  
City-St-Zip: DELTONA, FL 32725

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: THOMAS V. STOLLER

PRES

02/04/2008

Electronic Signature of Signing Officer or Director

Date