

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 25, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000119496

1. Entity Name  
TYDY, INC.



Principal Place of Business  
856 LINCOLN ROAD  
DELAND, FL 32724

Mailing Address  
856 LINCOLN ROAD  
DELAND, FL 32724



01112008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 73-1683993	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

WILLIAMS, TERRY C  
856 LINCOLN ROAD  
DELAND, FL 32724

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000798355  
01/30/08-80024-011 150.00

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME WILLIAMS, TERRY C  
STREET ADDRESS 856 LINCOLN ROAD  
CITY-ST-ZIP DELAND, FL 32724

TITLE VP  
NAME WILLIAMS, DEBORAH R  
STREET ADDRESS 856 LINCOLN ROAD  
CITY-ST-ZIP DELAND, FL 32724

TITLE TREA  
NAME WILLIAMS, TERRY C  
STREET ADDRESS 856 LINCOLN ROAD  
CITY-ST-ZIP DELAND, FL 32724

TITLE SEC  
NAME WILLIAMS, DEBORAH R  
STREET ADDRESS 856 LINCOLN ROAD  
CITY-ST-ZIP DELAND, FL 32724

TITLE DIR  
NAME WILLIAMS, TERRY C  
STREET ADDRESS 856 LINCOLN ROAD  
CITY-ST-ZIP DELAND, FL 32724

TITLE DIR  
NAME WILLIAMS, DEBORAH R  
STREET ADDRESS 856 LINCOLN ROAD  
CITY-ST-ZIP DELAND, FL 32724

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Terry C. Williams

1/23/08

(386) 775-4544

Date

Daytime Phone #