

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000022810

FILED  
Aug 08, 2005  
Secretary of State

Entity Name: TDK SERVICES INC.

**Current Principal Place of Business:**

3310 W. HIGHWAY 98  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

606 CRESTVIEW AVE  
NICEVILLE, FL 32578

**Current Mailing Address:**

3310 W. HIGHWAY 98  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

606 CRESTVIEW AVE  
NICEVILLE, FL 32578

FEI Number: 20-3178820

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KNIPE, TROY D SR.  
3310 W. HIGHWAY 98  
SANTA ROSA BEACH, FL 32459 US

**Name and Address of New Registered Agent:**

HICKMAN, JAMES A  
220 GOVERNMENT ST  
NICEVILLE, FL 32578 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: JAMES A HICKMAN

08/08/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: KNIPE, TROY D SR.  
Address: 3310 W. HIGHWAY 98  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: S (X) Delete  
Name: MCALARY, LARRY  
Address: 3310 W. HIGHWAY 98  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: KNIPE, TROY D SR.  
Address: 606 CRESTVIEW AVE  
City-St-Zip: NICEVILLE, FL 32578 US

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 Section 119.07(3)(i), 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: TROY D KNIPE SR

PT

08/08/2005

Electronic Signature of Signing Officer or Director

Date