

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000023926

Entity Name: TOM TODD, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

275 E. CENTRAL PARKWAY
#1511
ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address:

275 E. CENTRAL PARKWAY
#1511
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

871 CAPE DORY CT
1102
WINTER PARK, FL 32792 US

New Mailing Address:

871 CAPE DORY CT
1102
WINTER PARK, FL 32792 US

FEI Number: 41-2080957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TODD, TOM
275 E. CENTRAL PARKWAY
#1511
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

TODD, TOMMY
871 CAPE DORY CT
1102
WINTER PARK, FL 32792 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: TOMMY TODD

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: CAPULLI TODD, EVANILLA
Address: 871 CAPE CORY CT., #1102
City-St-Zip: WINTER PARK, FL 32792 US

Title: PTD () Delete
Name: TODD, TOMMY
Address: 871 CAPE CORY CT., #1102
City-St-Zip: WINTER PARK, FL 32792 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TODD, TOMMY L
Address: 871 CAPE CORY CT., #1102
City-St-Zip: WINTER PARK, FL 32792 US

Title: VP (X) Change () Addition
Name: CAPULLI TODD, EVANILIA
Address: 871 CAPE CORY CT., #1102
City-St-Zip: WINTER PARK, FL 32792 US

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: TOMMY L TODD

P

04/21/2005

Electronic Signature of Signing Officer or Director

Date