2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040228

18850 TIMBER LANE

FAIRVIEW PARK, OH 44126

Address: City-St-Zip:

Entity Name: TDE CONSULTANTS INCORPORATED

FILED Apr 30, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:	
	IEL MARA DRI CITY, FL 3240			
Current Mailing Address:			New Mailing Address:	
	IEL MARA DRI CITY, FL 3240			
FEI Number	: 27-0082848	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:	
117 CASH	THOMAS P IEL MARA DRI CITY, FL 3240			
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,
SIGNATU	RE:			
	Electror	ic Signature of Registered Ag	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (ENGLISH, THO 117 CASHEL N PANAMA CITY,	IARA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VTD (ENGLISH, THO 117 CASHEL N PANAMA CITY,	IARA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	SD (X ENGLISH, JAM) Delete ES G	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: THOMAS P. ENGLISH PD 04/30/2009