

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90303 009 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P05000019383 1. Entity Name TD DESIGN AND DEVELOPMENT, INC.					
Principal Place of Business 4080 GIANNINI LANE SARASOTA, FL 34233			Mailing Address 4080 GIANNINI LANE SARASOTA, FL 34233		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 20-2342271	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent LUZIER, THOMAS B 25 SOUTH LINKS AVE STE 300 SARASOTA, FL 34233				7. Name and Address of New Registered Agent Name <u>Same</u> Street Address (P.O. Box Number is Not Acceptable) <u>1990 Main Street, Ste 700</u> City <u>Sarasota</u> <u>FL</u> Zip Code <u>34236</u>	
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 <u>[Signature]</u> DATE <u>5-2-06</u>					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP D LORENZ, TERRY 4080 GIANNINI LANE SARASOTA, FL 34233 ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition		
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: <u>[Signature]</u> DATE <u>5/2/06</u>					