

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073112

Entity Name: 3D REMARKETING INC.

FILED  
Apr 17, 2006  
Secretary of State

## Current Principal Place of Business:

4960 LAKELAND COMMERCE PARKWAY, UNIT 4-5  
LAKELAND, FL 33805

## Current Mailing Address:

4960 LAKELAND COMMERCE PARKWAY, UNIT 4-5  
LAKELAND, FL 33805

## New Principal Place of Business:

4960 LAKELAND COMMERCE PARKWAY  
UNIT(S) 4-5  
LAKELAND, FL 33805

## New Mailing Address:

4960 LAKELAND COMMERCE PARKWAY, UNIT 4-5  
UNIT(S) 4-5  
LAKELAND, FL 33805

FEI Number: 20-2841132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ELLER, TERRANCE  
2011 BUCKTHORN  
LAKELAND, FL 33810 US

## Name and Address of New Registered Agent:

ELLER, TERRANCE  
1348 LAUREL GLEN DRIVE  
BARTOW, FL 33830 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:

04/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DANNER, ALLAN  
Address: 4960 LAKELAND COMMERCE PARKWAY, UNIT 4-5  
City-St-Zip: LAKELAND, FL 33805

Title: VPVC ( ) Delete  
Name: DOW, RICHARD B  
Address: 12755 SPRING RUN  
City-St-Zip: CLERMONT, FL 34711

Title: PTD ( ) Delete  
Name: ELLER, MICHAEL T  
Address: 9639 41ST STREET NORTH  
City-St-Zip: PINELLAS PARK, FL 33782

Title: SD ( ) Delete  
Name: ELLER, CONNIE  
Address: 9639 41ST STREET NORTH  
City-St-Zip: PINELLAS PARK, FL 33782

Title: CEOC ( ) Delete  
Name: ELLER, CYNDI  
Address: 9639 41ST STREET NORTH  
City-St-Zip: PINELLAS PARK, FL 33782

Title: COOD ( ) Delete  
Name: BURI, BERT W  
Address: 1319 TROON DR.  
City-St-Zip: SUN PRAIRIE, WI 53590

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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.

SIGNATURE: BURI, BERT W.

COOD

04/17/2006

Electronic Signature of Signing Officer or Director

Date