2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# P05000135864

Entity Name: TOM EASTMAN ENTERPRISES, INC.

Current Principal Place of Business:

201 DYER ROAD
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

201 DYER ROAD
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 20-3616192 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EASTMAN, SALLY
201 DYER ROAD
PORT ST. LUCIE, FL 34952 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: EASTMAN, SALLY
Address: 201 DYER ROAD
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: VPD ( ) Delete
Name: EASTMAN, TOM G
Address: 201 DYER ROAD
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: P ( ) Delete
Name: EASTMAN, SALLY
Address: 201 DYER RD.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VP ( ) Delete
Name: EASTMAN, TOM E
Address: 201 DYER RD.
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change ( ) Addition
Name: EASTMAN, TOM J
Address: 201 DYER ROAD
City-St-Zip: PORT ST. LUCIE, FL 34952

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

Title: VP (X) Change ( ) Addition
Name: EASTMAN, TOM J
Address: 201 DYER RD.
City-St-Zip: PORT SAINT LUCIE, FL 34952

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.

SIGNATURE: SALLY EASTMAN P/D 04/06/2009

Electronic Signature of Signing Officer or Director — Date