


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90053 039 ***150.00

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| DOCUMENT # P05000156686 |  |
| 1. Entity Name T.S. HAACK INC. | |

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| Principal Place of Business 2803 TULANE BRADENTON, FL 34205 | Mailing Address 2803 TULANE BRADENTON, FL 34205 |
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| 2. Principal Place of Business - No P.O. Box # 2803 Tulane Ave Suite, Apt. #, etc. | 3. Mailing Address 2803 Tulane Ave Suite, Apt. #, etc. |
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|--------------|--------------|
| City & State | City & State |
|--------------|--------------|

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|--------------|---------|--------------|---------|
| Zip 34207 | Country | Zip 34207 | Country |
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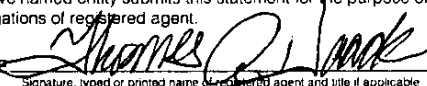
03192007 Chg-P CR2E034 (12/06)

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| 6. Name and Address of Current Registered Agent A TAX SHELTER 3704 US HWY 301 N SUITE 1 ELLENTON, FL 34222 | |
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| 4. FEI Number 20-3858710 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 7. Name and Address of New Registered Agent Name HAACK THOMAS A Street Address (P.O. Box Number is Not Acceptable) 2803 TULANE AVE BRADENTON FL Zip Code 34207 | |
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| 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  (NOTE: Registered Agent signature required when reinstating) DATE 4.5.07 | |
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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P HAACK, THOMAS A 2803 TULANE BRADENTON, FL 34205 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2803 Tulane Ave 34207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP HAACK, SUSAN K 2803 TULANE BRADENTON, FL 34205 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2803 Tulane Ave 34207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | DATE 4.5.07 (942)779-6752 Date Daytime Phone # |