

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90056 030 ***150.00

DOCUMENT # P06000058185

1. Entity Name
T & V 100, INC



Principal Place of Business

**1990 MAIN STREET
PH 15
SARASOTA, FL 34236**

Mailing Address

**1990 MAIN STREET
PH 15
SARASOTA, FL 34236**

40040895



2. Principal Place of Business - No P.O. Box #

1636 MAIN ST

Suite, Apt. #, etc.

3. Mailing Address

1636 MAIN ST

Suite, Apt. #, etc.

03062007 Chg-P CR2E034 (12/06)

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

20-4750726

Applied For

Not Applicable

Zip

34236

Country

USA

Zip

34236

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**THOMPSON, TERESA M
1990 MAIN STREET
PH 15
SARASOTA, FL 34236**

7. Name and Address of New Registered Agent

Name **SIZEMORE, VINCENT**

Street Address (P.O. Box Number is Not Acceptable)

1636 MAIN ST

City **SARASOTA**

FL

Zip Code

34236

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

Signature of officer or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-issuing)

DATE

✓ 3/22/07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P T** ☐ Delete
NAME **THOMPSON, TERESA M**
STREET ADDRESS **1990 MAIN STREET, PH 15**
CITY-ST-ZIP **SARASOTA, FL 34236**

TITLE **VP S** ☐ Delete
NAME **SIZEMORE, VINCENT**
STREET ADDRESS **1990 MAIN STREET, PH 15**
CITY-ST-ZIP **SARASOTA, FL 34236**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P T** ☒ Change ☐ Addition
NAME **EVANOFF, TERESA**
STREET ADDRESS **5780 SWIFT RD**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE **VP S** ☒ Change ☐ Addition
NAME **SIZEMORE, VINCENT**
STREET ADDRESS **1636 MAIN ST**
CITY-ST-ZIP **SARASOTA, FL 34236**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 on 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 line empowered.

SIGNATURE: **✓**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓ 3/22/07

Date

Daytime Phone #