

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000071092

Entity Name: TRIPLE 8 HOLDINGS, INC.

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1949 WOLFORD ROAD  
CLEARWATER, FL 33760 US

**New Principal Place of Business:**

**Current Mailing Address:**

1949 WOLFORD ROAD  
CLEARWATER, FL 33760 US

**New Mailing Address:**

FEI Number: 41-2206371

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JANSSEN, TONI L  
1949 WOLFORD ROAD  
CLEARWATER, FL 33760 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JANSSEN, BART  
Address: 1949 WOLFORD ROAD  
City-St-Zip: CLEARWATER, FL 33760 US

Title: T  
Name: JANSSEN, BART  
Address: 1949 WOLFORD ROAD  
City-St-Zip: CLEARWATER, FL 33760 US

Title: DVP  
Name: JANSSEN, TONI L  
Address: 1949 WOLFORD ROAD  
City-St-Zip: CLEARWATER, FL 33760 US

Title: S  
Name: JANSSEN, TONI L  
Address: 1949 WOLFORD ROAD  
City-St-Zip: CLEARWATER,, FL 33760 US

I hereby 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 all other like empowered.

SIGNATURE: TONI JANSSEN

VP

04/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date