

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90004 014 \*\*\*150.00

<b>DOCUMENT # P06000082024</b> 1. Entity Name <b>TEAM BD, INC.</b>			
Principal Place of Business <b>2281 NW 53RD STREET BOCA RATON, FL 33496</b>		Mailing Address <b>2281 NW 53RD STREET BOCA RATON, FL 33496</b>	
2. Principal Place of Business - No P.O. Box # <b>7775 COLONY LAKE DR</b>		3. Mailing Address <b>7775 COLONY LAKE DR</b>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State <b>BOYNTON BEACH FL</b>		City & State <b>BOYNTON BEACH FL</b>	
Zip <b>33436</b>		Zip <b>33436</b>	
Country <b>USA</b>		Country <b>USA</b>	
4. FEI Number <b>20-5071739</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>STEINBERG, FRED 2281 NW 53RD STREET BOCA RATON, FL 33496</b>		7. Name and Address of New Registered Agent Name <b>WILLIAM L. TOWNSEND</b> Street Address (P.O. Box Number is Not Acceptable) <b>7775 COLONY LAKE DR.</b> City <b>BOYNTON BEACH FL</b> Zip Code <b>33436</b>	
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  <b>WILLIAM L. TOWNSEND PRESIDENT</b> <b>7/30/07</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STEINBERG, FRED 2281 NW 53RD STREET BOCA RATON, FL 33496 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TOWNSEND, WILLIAM L 7775 COLONY LAKE DRIVE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  <b>WILLIAM L. TOWNSEND PRESIDENT</b> <b>7/30/07</b> <b>239-910-7730</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

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