

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000105506

FILED
Apr 11, 2007
Secretary of State

Entity Name: TDP INC.

Current Principal Place of Business:

C/O CORPDIRECT AGENTS, INC.
515 E PARK AVE
TALLAHASSEE, FL 32301

New Principal Place of Business:

1901 W. 47TH PLACE
SUITE 10
WESTWOOD, KS 66205

Current Mailing Address:

C/O CORPDIRECT AGENTS, INC.
515 E PARK AVE
TALLAHASSEE, FL 32301

New Mailing Address:

9130 GALLERIA COURT
SUITE 317
NAPLES, FL 34109

FEI Number: 20-5377430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E PARK AVE
TALLAHASSEE, FL 32301 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: LEMAY, LANCE T
Address: 1901 W. 47TH PLACE, STE. 10
City-St-Zip: WESTWOOD, KS 66205

Title: D () Change (X) Addition
Name: LEMAY, RONALD T
Address: 1901 W. 47TH PLACE, STE 10
City-St-Zip: WESTWOOD, KS 66205

Title: D/P () Change (X) Addition
Name: NOVICK, WALTER R
Address: 1901 W. 47TH PLACE, STE 10
City-St-Zip: WESTWOOD, KS 66205

Title: D/VP () Change (X) Addition
Name: RELF, SCOTT B
Address: 9130 GALLERIA COURT, STE 317
City-St-Zip: NAPLES, FL 34109

Title: S/T () Change (X) Addition
Name: RELF, SCOTT B
Address: 9130 GALLERIA COURT, STE 317
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT B. RELF

VP

04/11/2007

Electronic Signature of Signing Officer or Director

_____ Date