

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144142

FILED
Feb 04, 2009
Secretary of State

Entity Name: TRUSTED THIRD PARTY, INC.

Current Principal Place of Business:

1020 E. LAFAYETTE ST., SUITE 105
TALLAHASSEE, FL 32301

New Principal Place of Business:

1030 E. LAFAYETTE ST., SUITE 1
TALLAHASSEE, FL 32301

Current Mailing Address:

1020 E. LAFAYETTE ST., SUITE 105
TALLAHASSEE, FL 32301

New Mailing Address:

1030 E. LAFAYETTE ST., SUITE 1
TALLAHASSEE, FL 32301

FEI Number: 20-5576261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNER, CHARLES E
1020 E. LAFAYETTE ST., SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

BARNER, CHARLES E
1030 E. LAFAYETTE ST., SUITE 1
TALLAHASSEE, FL 32301 US

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:

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BARNER, CHARLES E
Address: 1020 E. LAFAYETTE ST., SUITE 105
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: ROMELFANGER, MARY A
Address: 1020 E. LAFAYETTE ST., SUITE 105
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: DEPUY, CLARENCE E
Address: 1020 E. LAFAYETTE ST., SUITE 105
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: BARNER, CHARLES E
Address: 1030 E. LAFAYETTE ST., SUITE 1
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change () Addition
Name: ROMELFANGER, MARY A
Address: 1030 E. LAFAYETTE ST., SUITE 1
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change () Addition
Name: DEPUY, CLARENCE E
Address: 1030 E. LAFAYETTE ST., SUITE 1
City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES E. BARNER

CD

02/04/2009

Electronic Signature of Signing Officer or Director

Date