

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000057669

FILED  
Apr 26, 2009  
Secretary of State

Entity Name: TEAGARDEN ENTERPRISES, INC.

## Current Principal Place of Business:

606 LAKEWORTH CIRCLE  
HEATHROW, FL 327465364

## New Principal Place of Business:

## Current Mailing Address:

606 LAKEWORTH CIRCLE  
HEATHROW, FL 327465364

## New Mailing Address:

FEI Number: 26-0189379

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD, SUITE 101  
TALLAHASSEE, FL 323012960 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: DP ( ) Delete  
Name: TEAGARDEN, ERIK  
Address: 606 LAKEWORTH CIRCLE  
City-St-Zip: HEATHROW, FL 327465364

Title: VP ( ) Delete  
Name: TEAGARDEN, DON  
Address: 606 LAKEWORTH CIRCLE  
City-St-Zip: HEATHROW, FL 327465364

Title: DS ( ) Delete  
Name: TEAGARDEN, GREGORY  
Address: 606 LAKEWORTH CIRCLE  
City-St-Zip: HEATHROW, FL 327465364

Title: T ( ) Delete  
Name: TEAGARDEN, MICHELLE  
Address: 606 LAKEWORTH CIRCLE  
City-St-Zip: HEATHROW, FL 327465364

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: TEAGARDEN, GREGORY  
Address: 107 CROWN COLONY WAY  
City-St-Zip: SANFORD, FL 32771

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TEAGARDEN, ERIK

DP

04/26/2009

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

\_\_\_\_\_  
Date