# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 16, 2008**
**Secretary of State**

DOCUMENT# P07000079120

**Entity Name:** TD TRADING & ASSOCIATES, INC.

**Current Principal Place of Business:**

1050 US HWY 27
21
CLERMONT, FL 34714

**New Principal Place of Business:**

1050 US HWY 27
2
CLERMONT, FL 34714

**Current Mailing Address:**

1050 US HWY 27
21
CLERMONT, FL 34714

**New Mailing Address:**

1050 US HWY 27
2
CLERMONT, FL 34714

**FEI Number: 26-0504176** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

SCOTT, AUNDRE W
1050 US HWY 27
21
CLERMONT, FL 34714 US

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

SCOTT, AUNDRE W
1050 US HWY 27
2
CLERMONT, FL 34714 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: AUNDRE SCOTT 04/16/2008
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete
Name: DAVIS, DANIELLE
Address: 6 CORTHELL STREET
City-St-Zip: ALBANY, NY 12205

Title: VP ( ) Delete
Name: THOMAS, PAULETTE
Address: 6 CORTHELL STREET
City-St-Zip: ALBANY, NY 12205

Title: SEC ( ) Delete
Name: THOMAS, PAULETTE
Address: 6 CORTHELL STREET
City-St-Zip: ALBANY, NY 12205

Title: TRES ( ) Delete
Name: THOMAS, PAULETTE
Address: 6 CORTHELL STREET
City-St-Zip: ALBANY, NY 12205

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: AUNDRE SCOTT RA 04/16/2008
Electronic Signature of Signing Officer or Director Date