

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080461

Entity Name: TKL ASSOICATES, INC.

FILED  
Apr 17, 2009  
Secretary of State

## Current Principal Place of Business:

4305 CHAMBERLIN COURT  
ST. CLOUD, FL 34772

## New Principal Place of Business:

2791 CYPRESS DOME COURT  
ST. CLOUD, FL 34772

## Current Mailing Address:

4305 CHAMBERLIN COURT  
ST. CLOUD, FL 34772

## New Mailing Address:

2791 CYPRESS DOME COURT  
ST. CLOUD, FL 34772

FEI Number: 26-0684437

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TELLEZ, KERI  
4305 CHAMBERLIN COURT  
ST. CLOUD, FL 34772 US

## Name and Address of New Registered Agent:

TELLEZ, KERI  
2791 CYPRESS DOME COURT  
ST. CLOUD, FL 34772 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:

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: TELLEZ, KERI  
Address: 4305 CHAMBERLIN COURT  
City-St-Zip: ST. CLOUD, FL 34772

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: TELLEZ, KERI  
Address: 2791 CYPRESS DOME COURT  
City-St-Zip: ST. CLOUD, FL 34772

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: KERI TELLEZ

PRES

04/17/2009

Electronic Signature of Signing Officer or Director

Date