

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000032722

FILED
Mar 01, 2009
Secretary of State

Entity Name: TECHNICAL SYSTEMS MANAGEMENT CORPORATION

Current Principal Place of Business:

22825 REDFISH LANE
CUDJOE KEY, FL 33042 US

New Principal Place of Business:

Current Mailing Address:

22825 REDFISH LANE
CUDJOE KEY, FL 33042 US

New Mailing Address:

FEI Number: 83-0509521 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD.
SUITE A-100
TAMPA, FL 33612 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: PRES () Delete
Name: LINDER, JAMES C
Address: 22825 REDFISH LANE
City-St-Zip: CUDJOE KEY, FL 33042 US

Title: TRES () Delete
Name: LINDER, BARBARA W
Address: 22825 REDFISH LANE
City-St-Zip: CUDJOE KEY, FL 33042 US

Title: SEC () Delete
Name: LINDER, BARBARA W
Address: 22825 REDFISH LANE
City-St-Zip: CUDJOE KEY, FL 33042 US

Title: DIR () Delete
Name: LINDER, JAMES C
Address: 22825 REDFISH LANE
City-St-Zip: CUDJOE KEY, FL 33042 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LINDER, JAMES C
Address: 247 HAROLD ANDREWS RD
City-St-Zip: SILER CITY, NC 27344 US

Title: TRES (X) Change () Addition
Name: LINDER, BARBARA W
Address: 247 HAROLD ANDREWS RD
City-St-Zip: SILER CITY, NC 27344 US

Title: SEC (X) Change () Addition
Name: LINDER, BARBARA W
Address: 247 HAROLD ANDREWS RD
City-St-Zip: SILER CITY, NC 27344 US

Title: DIR (X) Change () Addition
Name: LINDER, JAMES C
Address: 247 HAROLD ANDREWS RD
City-St-Zip: SILER CITY, FL 27344 US

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: JAMES C. LINDER

PRES

03/01/2009

Electronic Signature of Signing Officer or Director

_____ Date