2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000044905

Entity Name: TEEM, INC.

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

415 LAKE POINT DRIVE #302 415 LAKEPOINTE DRIVE

ALTAMONTE SPRINGS, FL 32701 302

ALTAMONTE SPRINGS, FL 32701

Current Mailing Address: New Mailing Address:

415 LAKE POINT DRIVE #302 415 LAKEPOINTE DRIVE

ALTAMONTE SPRINGS, FL 32701 302

ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 26-2683477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EBY, TODD E

415 LAKE POINT DRIVE #302 415 LAKEPOINTE DRIVE

ALTAMONTE SPRINGS, FL 32701 US 302 ALTAMONTE SPRINGS, FL 32701 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: TODD E. EBY 01/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

le: PST () Delete Title: PST (X) Change () Addition

 Title:
 PST () Delete
 Title:
 PST ()

 Name:
 EBY, TODD
 Name:
 EBY, TODD E

Address: 415 LAKE POINT DRIVE #302 Address: 415 LAKEPOINTE DRIVE #302
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP () Delete Title: () Change () Addition

 Name:
 EBY, TODD
 Name:

 Address:
 415 LAKE POINT DRIVE #302
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 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: TODD E. EBY PST 01/05/2009