


2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT # P37614
 1. Entity Name
TSB, INC., A KANSAS CORPORATION



Principal Place of Business _____ Mailing Address _____
% HOLLYWOOD BEACH RESORT HOTEL **101 NORTH OCEAN DRIVE**
101 N. OCEAN DRIVE **SUITE #8**
HOLLYWOOD, FL 33019 **HOLLYWOOD BEACH, FL 33019 US**

DO NOT WRITE IN THIS SPACE



01052005 No Chg-P CR2E034 (10/03)

4. FEI Number 48-1089592	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAUMAN, DAVID M
7820 PETERS RD
STE E-103
PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees


100000203513
 01/29/05-80033-010 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	C SCHECHER, RICHARD 500 CRAIG RD MANALAPAN, NJ 07726
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like powers.

SIGNATURE:  **01/29/2005 (954) 921-0990**
SIGNATURE, TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date Daytime Phone #

RICHARD SCHECHER