

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000004068

Entity Name: TECHNAMOLD, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

5190-110TH AVENUE NORTH  
CLEARWATER, FL 33760

## New Principal Place of Business:

## Current Mailing Address:

5190-110TH AVENUE NORTH  
CLEARWATER, FL 33760

## New Mailing Address:

FEI Number: 59-3151086

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILFEARD, MIKE  
5190 110TH AVE N  
CLEARWATER, FL 33760 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WILFEARD, MIKE  
Address: 5190 110TH AVE N  
City-St-Zip: CLEARWATER, FL 33760

Title: VPST ( ) Delete  
Name: WILFEARD, KATHLEEN  
Address: 5190 110TH AVE N  
City-St-Zip: CLEARWATER, FL 33760

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WILFEARD, MIKE  
Address: 5190 110TH AVE N  
City-St-Zip: CLEARWATER, FL 33760

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: KATHLEEN WILFEARD

V.P.

05/01/2009

Electronic Signature of Signing Officer or Director

Date