## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000049647

Address:

City-St-Zip:

226 FENTRESS BOULEVARD

DAYTONA BEACH, FL 32114

FILED May 06, 2009 Secretary of State

Entity Nar	me: TEL-TRO	ON TECH	INOLOGIES CORPOR	ATION						
Current P	Ne	New Principal Place of Business:								
	RESS BLVD. BEACH, FL	32114								
Current M	Ne	New Mailing Address:								
	RESS BLVD. BEACH, FL	32114								
FEI Number:	: 59-3191612	FEI Nu	mber Applied For ( )	FEI Numbe	Not App	licable ( )	Certific	ate of Status I	Desired ( )	
Name and	Address of (	Current I	Registered Agent:	Na	ıme and	l Address o	of New Re	gistered Ag	ent:	
DAWSON, RICK N. 226 FENTRESS BLVD. DAYTONA BEACH, FL 32114 US					DAWSON, MELINDA 226 FENTRESS BLVD. DAYTONA BEACH, FL 32114 US					
	named entity e of Florida.	submits <sup>.</sup>	this statement for the p	urpose of ch	anging i	its registere	ed office or	registered a	gent, or both,	
SIGNATURE: MELINDA GROSKLOS							(	05/06/2009		
	Electron	nic Signa	ture of Registered Age	nt				Date		
Election Car	npaign Financin	g Trust Fu	und Contribution ( ).							
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	C/D ( DAWSON, N. F 226 FENTRES DAYTONA BEA	S BLVD.	2114	Add	e: me: dress: y-St-Zip:		( ) Change	( ) Addition		
Title: Name: Address: City-St-Zip:	WITHAM, ALLE	T, ENTERF	PRISE BLDG, 5TH FLOOR 02	Ade	e: me: dress: y-St-Zip:		( ) Change	( ) Addition		
Title: Name: Address: City-St-Zip:	D ( MCCOLLAM, B 1513 OAK FOF ORMOND BEA	REST DR.		Ade	e: me: dress: y-St-Zip:		( ) Change	( ) Addition		
Title: Name: Address: City-St-Zip:	CEO ( DAWSON, BRI 20 FOREST VI ORMOND BEA	EW WAY	2174	Add	e: me: dress: y-St-Zip:		( ) Change	( ) Addition		
Title: Name:	D ( DAWSON, MEI	) Delete LINDA D		Titl Na	e: me:	D/VP DAWSON,	(X) Change MELINDA D	( ) Addition		

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.

Address:

City-St-Zip:

226 FENTRESS BOULEVARD

DAYTONA BEACH, FL 32114

SIGNATURE: MELINDA DAWSON VΡ 05/06/2009