

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000052716

Entity Name: TRIPLE C AND D CORP.

FILED  
Apr 19, 2011  
Secretary of State

**Current Principal Place of Business:**

100 N MISSOURI AVE  
CLEARWATER, FL 33755 US

**New Principal Place of Business:**

**Current Mailing Address:**

100 N MISSOURI AVE  
CLEARWATER, FL 33755 US

**New Mailing Address:**

FEI Number: 59-3192867

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SNEDEKER, C E  
100 N MISSOURI AVE  
CLEARWATER, FL 33755 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SNEDEKER, CLIFFORD E.  
Address: 670 ISLAND WAY #1003  
City-St-Zip: CLEARWATER, FL 33767

Title: VSD  
Name: SNEDEKER, DEANNA L.  
Address: 670 ISLAND WAY #1003  
City-St-Zip: CLEARWATER, FL 33767

Title: TD  
Name: SNEDEKER, CLINT E.  
Address: 670 ISLAND WAY #1003  
City-St-Zip: CLEARWATER, FL 33767

Title: D  
Name: SNEDEKER, CLIFFORD E III  
Address: 1001 MALLARD WAY  
City-St-Zip: FLOWER MOUND, TX 75028

I hereby 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 all other like empowered.

SIGNATURE: DEANNA L SNEDEKER

VSD

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date