

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000040288

FILED  
Mar 02, 2005  
Secretary of State

Entity Name: TEASDALE ENTERPRISES, INC.

## Current Principal Place of Business:

C/O 300 MARY ESTHER BLVD.  
MARY ESTHER, FL 32569

## New Principal Place of Business:

## Current Mailing Address:

C/O 300 MARY ESTHER BLVD.  
SANTA ROSA MALL STE 208  
MARY ESTHER, FL 32569

## New Mailing Address:

FEI Number: 59-3242913      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOHAN, DEVENDRA  
300 MARY ESTHER BLVD.  
MARY ESTHER, FL 32569      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MOHAN, DEVENDRA  
Address: 2240 MARTIN LUTHER KING BLVD  
City-St-Zip: PANAMA CITY, FL 32405

Title: C ( ) Delete  
Name: TEASDALE, ROBERT  
Address: 1917 BISCAYNE BLVD  
City-St-Zip: NAVARRE, FL 32566

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: MOHAN, ILA  
Address: 17757, FRONT BEACH ROAD, UNIT#1809  
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEVENDRA MOHAN

P

03/02/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date