2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000041830

Title:

Name:

Address:

City-St-Zip:

FILED Apr 11, 2006 Secretary of State

Entity Name: T.S.I. ROCKLEDGE INVESTMENT CORP. **Current Principal Place of Business: New Principal Place of Business:** 2990 S. FISKE BLVD ROCKLEDGE, FL 32955 **Current Mailing Address: New Mailing Address:** 2990 S. FISKE BLVD ROCKLEDGE, FL 32955 FEI Number: 59-3321466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALSER, WILHELM WALSER, WILHELM A 2990 S FISKE BLVD. D-1 2990 S FISKE BLVD. US ROCKLEDGE, FL 32955 ROCKLEDGE, FL 32955 US 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: WILHELM WALSER 04/11/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SCHWENDENER, JUERG Name: Name: 2990 S. FISKE BLVD. Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: Title: () Delete () Change () Addition BALDEGGER, ALBERT Name: Name: 2990 S. FISKE BLVD. Address: Address: ROCKLEDGE, FL 32955 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition WALSER, WILHELM A Name: Name: 2990 S. FISKE BLVD. Address: Address: City-St-Zip: ROCKLEDGE, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: WILHELM WALSER VP 04/11/2006

() Delete

() Change (X) Addition

WALSER, OLIVER W

2990 S. FISKE BLVD.

ROCKLEDGE, FL 32955