2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2008
Secretary of State

DOCUMENT# P95000054405

Entity Name: TIS, INC.

Current Principal Place of Business:

105-107TH AVE
TREASURE ISLAND, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

6852 GULFPORT BLVD.
SOUTH PASADENA, FL 33707

New Mailing Address:

FEI Number: 59-3325123 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEWBERNE, STEVEN V PRES
6852 GULFPORT BLVD
SO PASADENA, FL 33707 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: D ( ) Delete
Name: NEWBERNE, STEVEN V PRES
Address: 6852 GULFPORT BLVD
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: D ( ) Delete
Name: NEWBERNE, VERGIL L V.PRES
Address: 1320 PASADENA AVE # 107
City-St-Zip: ST. PETERSBURG, FL 33707

Title: D ( ) Delete
Name: NEWBERNE, DOROTHY S TREAS
Address: 1320 PASADENA AVE # 107
City-St-Zip: ST. PETERSBURG, FL 33707

Title: D ( ) Delete
Name: SHAIN, CYNTHIA N SEC
Address: 922 MARCO DRIVE NE
City-St-Zip: ST. PETERSBURG, FL 33702

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: CYNTHIA N SHAIN SD 02/15/2008

Electronic Signature of Signing Officer or Director Date