


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # P95000071708 1. Entity Name TECHNIMARK, INC.	
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Principal Place of Business 2673 SPY GLASS DRIVE CLEARWATER, FL 33761 US	Mailing Address 2673 SPY GLASS DRIVE CLEARWATER, FL 33761 US
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DO NOT WRITE IN THIS SPACE



04142008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3335517	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WADDELL, MARK R 2673 SPYGLASS DRIVE CLEARWATER, FL 33761	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ U000000902540
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 04/30/08-80410-005 150.00

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WADDELL, MARK R 2673 SPYGLASS DRIVE CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WADDELL, KATHI 2673 SPYGLASS DRIVE CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WADDELL, CHARLES E 2054 DIPLOMAT DRIVE CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark R Waddell **MARK R WADDELL** 4/14/08 727-744-3453
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #