

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000073981

1. Entity Name
CDL TESTING, INC.



Principal Place of Business
5411 WEST TYSON AVE.
TAMPA, FL 33611

Mailing Address
5411 WEST TYSON AVE.
TAMPA, FL 33611



02162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3342630

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KEARNEY, JOHN E SR.
5411 WEST TYSON AVE.
TAMPA, FL 33611

**DO NOT WRITE
IN THIS SPACE**

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

Signature, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

UN00000677138
03/30/07-80092-027 158.75

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	TOMION, JON C
STREET ADDRESS	5411 W. TYSON AVE
CITY-ST-ZIP	TAMPA, FL
TITLE	CEOD
NAME	KEARNEY, JOHN E SR
STREET ADDRESS	5411 W. TYSON AVE.
CITY-ST-ZIP	TAMPA, FL
TITLE	D
NAME	MCCLOY, ALFRED A
STREET ADDRESS	5411 W. TYSON AVE.
CITY-ST-ZIP	TAMPA, FL
TITLE	STVD
NAME	KEARNEY, JOHN E JR
STREET ADDRESS	5411 W. TYSON AVE.
CITY-ST-ZIP	TAMPA, FL
TITLE	P
NAME	KEARNEY, JOHN E SR
STREET ADDRESS	5411 W. TYSON AVE.
CITY-ST-ZIP	TAMPA, FL
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:

John E Kearney Jr

John E Kearney Jr

2/19/2007

(813) 831-4490 x 231

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone