

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000003046

FILED
Feb 01, 2012
Secretary of State

Entity Name: T D T, INC.

Current Principal Place of Business:

6115 SW LELAND AVENUE
DES MOINES, IA 50321

New Principal Place of Business:

Current Mailing Address:

6115 SW LELAND AVENUE
DES MOINES, IA 50321

New Mailing Address:

FEI Number: 59-3363076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: P
Name: ANNETT, HARROLD W
Address: 6115 SW LELAND AVENUE
City-St-Zip: DES MOINES, IA 50321 US

Title: VP
Name: CLARK, LARRY J
Address: 6115 SW LELAND AVENUE
City-St-Zip: DES MOINES, IA 50321 US

Title: SEC
Name: ANNETT, HARROLD W
Address: 6115 SW LELAND AVENUE
City-St-Zip: DES MOINES, IA 50321 US

Title: TREA
Name: ANNETT, HARROLD W
Address: 6115 SW LELAND AVENUE
City-St-Zip: DES MOINES, IA 50321 US

Title: VP
Name: MCCRAVY, GLEN
Address: 6115 SW LELAND AVENUE
City-St-Zip: DES MOINES, IA 50321

Title: D
Name: ANNETT, HARROLD W
Address: 6115 SW LELAND AVENUE
City-St-Zip: DES MOINES, IA 50321 US

I hereby 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 all other like empowered.

SIGNATURE: LARRY J. CLARK

VP

02/01/2012

Electronic Signature of Signing Officer or Director

Date