


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000020348 1. Entity Name T.P. GRAPHICS, INC.		
Principal Place of Business 1112 S BAY STREET EUSTIS, FL 32726-547 US	Mailing Address 1112 S BAY STREET EUSTIS, FL 32726-547 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PRIDGEN, TERESA L 20200 BILL COLLINS ROAD EUSTIS, FL 32726		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PRIDGEN, TERESA L 20200 BILL COLLINS ROAD EUSTIS, FL 32736	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V PRIDGEN, STEVE E 20200 BILL COLLINS ROAD EUSTIS, FL 32736	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <u>Teresa Lynn Pridgen</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>7-17-07</u> <u>(352) 589-1555</u> <small>Date Daytime Phone #</small>



07162007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3365817	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

U000000763446
07/19/07-80001-012 150.00

**DO NOT WRITE
IN THIS SPACE**