


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 06, 2007 8:00 am**  
**Secretary of State**

08-06-2007 90033 008 \*\*\*158.75

<b>DOCUMENT # P97000032210</b> 1. Entity Name TSAS, INC.	
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Principal Place of Business 15050 NW US HWY 441 ALACHUA, FL 32615	Mailing Address 4526 SW 63RD BLVD GAINESVILLE, FL 32608
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**DO NOT WRITE IN THIS SPACE**



07272007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3438670	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  STALBAUM, BARBARA J 4526 SW 63RD BLVD GAINESVILLE, FL 32608	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STALBAUM, THOMAS R 4526 SW 63RD BLVD GAINESVILLE, FL 32608
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STALBAUM, BARBARA J 4526 SW 63RD BLVD GAINESVILLE, FL 32608
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**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:** *Barbara J. Stalbaum* **1/19/07 352-375-1790**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40128343

7/19/07

TSAS, INC

Doc # P9 70000 32210

I talked with Debra today  
Concerning V#5399 payable to  
IL Dept of State for \$158.75  
had as of today not cleared  
my bank account. I also  
had not received the status  
certificate for our Corporation.

Debra found that my check  
on UBR hadn't made it to your  
office. It was mailed  
3/13/2007. She instructed  
me to print a form from  
the Sunbiz web site and  
send a replacement check.  
Enclosed are the two. My  
original V#5399 has been  
cancelled through my