

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000065600

FILED
Feb 04, 2008
Secretary of State

Entity Name: TBS ACCOUNTING & BUSINESS STRATEGIES, INC.

Current Principal Place of Business:

1310 W. COLONIAL DRIVE
SUITE 16
ORLANDO, FL 32804

New Principal Place of Business:

13725 LAKE CAWOOD DRIVE
WINDERMERE, FL 34786

Current Mailing Address:

1310 W. COLONIAL DRIVE
SUITE 16
ORLANDO, FL 32804

New Mailing Address:

13725 LAKE CAWOOD DRIVE
WINDERMERE, FL 34786

FEI Number: 59-3456100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SYMONETTE, THOMAS B JR.
1310 W. COLONIAL DR.
SUITE 16
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

SYMONETTE, THOMAS B JR.
13725 LAKE CAWOOD DRIVE
WINDERMERE, FL 34786 US

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: TBSYMONETTE

02/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SYMONETTE, THOMAS B JR.
Address: 1310 W. COLONIAL DR. #16
City-St-Zip: ORLANDO, FL 32804

Title: DV (X) Delete
Name: SYMONETTE, JANICE M
Address: 1310 W. COLONIAL DR. #16
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SYMONETTE, THOMAS B JR.
Address: 13725 LAKE CAWOOD DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TBSYMONETTE

DP

02/04/2008

Electronic Signature of Signing Officer or Director

Date