## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000019551

Entity Name: TM2, INC.

FILED May 20, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

401 WEST LAKE BRANTLEY RD. 1188 LAKE VIEW DRIVE

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

2493 RIVER TREE CIRCLE 1188 LAKE VIEW DRIVE

SANFORD, FL 32771 ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3511398 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLOOMER III, WILLIAM J.

401 WEST LAKE BRANTLEY RD.

BLOOMER, WILLIAM J III

1188 LAKE VIEW DRIVE

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 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: WILLIAM J BLOOMER III 05/20/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D/PR (X) Change ( ) Addition

 Name:
 MOFFIT, THOMAS H JR.
 Name:
 MOFFIT, THOMAS H JR.

 Address:
 2493 RIVER TREE CIRCLE
 Address:
 2493 RIVER TREE CIRCLE

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:
 SANFORD, FL 32771

Title: D () Delete Title: () Change () Addition

 Name:
 MOFFIT, LINDA K
 Name:

 Address:
 2493 RIVER TREE CIRCLE
 Address:

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:

Title: D ( ) Delete Title: D/TR (X) Change ( ) Addition

 Name:
 MOFFIT, THOMAS H SR.
 Name:
 BLOOMER, WILLIAM J III

 Address:
 150 VALMORA DRIVE
 Address:
 1220 FREEDOM COURT

 City-St-Zip:
 CASSELBERRY, FL 32707
 City-St-Zip:
 OCOEE, FL 34761 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM J. BLOOMER III D/TR 05/20/2004