


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 03, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000059915</b> 1. Entity Name <b>TOTAL COMMUNICATION PROFESSIONALS, INC.</b>	
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Principal Place of Business <b>8104 EL PORTAL DR. TAMPA, FL 33604-2811</b>	Mailing Address <b>8104 EL PORTAL AVE TAMPA, FL 33604</b>
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02222006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3524643</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>RAULERSON, JOHNNIE J 10611 RAULERSON RANCH RD TAMPA, FL 33637</b>
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00** May Be Added to Fees  
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <b>CANTERO, BARBARA E 18650 GULF BLVD APT 405 INDIAN SHORE BEACH, FL 33785</b>
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03/15/06-20038-017 150.00

**DO NOT WRITE  
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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 E. Cantero* President 3/1/06 (913) 933-9200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
**BARBARA E. CANTERO**