

STATE OF FLORIDA 10-10-93 AM

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90180 002 ***150.00

PROFIT CORPORATION ANNUAL REPORT	 FLORIDA DEPARTMENT OF STATE Sandra B. McInnis Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000075797

1. Corporation Name

T.T.O., INC.

00007333

Principal Place of Business 6352 HUNTINGTON LAKES CIR #202 NAPLES, FL 34119	Mailing Address 6352 HUNTINGTON LAKES CIR #202 NAPLES, FL 34119
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 28 Suite, Apt. #, etc. 27 City & State 29 Zip 30 Country	3. Date Incorporated or Qualified	3a. Date of Last Report	4. FEI Number 59-3542522	Applied For Not Applicable
		5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required ☐ \$5.00 May Be Added to Fees		
		6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees ☐ No		
		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			

9. Name and Address of Current Registered Agent ECKHARDT, NANCY C. 6352 HUNTINGTON LAKES CIRCLE #202 NAPLES, FL 34119	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ECKHARDT, NANCY C. 6352 HUNTINGTON LAKES CIRCLE #202 NAPLES, FL 34119	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
2. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DODD, BARBARA C. 6352 HUNTINGTON LAKES CIRCLE #202 NAPLES, FL 34119	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
3. TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
4. TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
5. TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
6. TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if it were signed by me in person.

SIGNATURE: Nancy Eckhardt Director 4/15/03

CR25034 (12/95)