

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000090985

Entity Name: TOTAL MAINTENANCE, INC.

FILED  
Jan 13, 2009  
Secretary of State

## Current Principal Place of Business:

6560 PRK LN W  
LAKE WORTH, FL 33449

## New Principal Place of Business:

6560 PARK LN W  
LAKE WORTH, FL 33449

## Current Mailing Address:

6560 PRK LN W  
LAKE WORTH, FL 33449

## New Mailing Address:

6560 PARK LN W  
LAKE WORTH, FL 33449

FEI Number: 65-0969442

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CABEZAS, NANCY  
6560 PRK LN  
LAKE WORTH, FL 33449 US

## Name and Address of New Registered Agent:

CABEZAS, NANCY  
6560 PARK LN W  
LAKE WORTH, FL 33449 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: NANCY CABEZAS

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DTP ( ) Delete  
Name: CABEZAN, NANCY  
Address: 6560 PRK LN W  
City-St-Zip: LAKE WORTH, FL 33449

Title: S ( ) Delete  
Name: CABEZAS, NANCY  
Address: 6560 PRK LN W  
City-St-Zip: LAKE WORTH, FL 33449

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DTP (X) Change ( ) Addition  
Name: CABEZAS, NANCY  
Address: 6560 PARK LN W  
City-St-Zip: LAKE WORTH, FL 33449

Title: S (X) Change ( ) Addition  
Name: CABEZAS, NANCY  
Address: 6560 PARK LN W  
City-St-Zip: LAKE WORTH, FL 33449

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: NANCY CABEZAS

PRS

01/13/2009

Electronic Signature of Signing Officer or Director

Date