2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S82338

Entity Name: TUMAN ENTERPRISES, INC.

FILED Feb 14, 2008 Secretary of State

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

4020 N.E. 19TH AVE. 3947 S.E. 40TH ST. OCALA, FL 34479 US OCALA, FL 34480 US

Current Mailing Address: New Mailing Address:

4020 N.E. 19TH AVE. 3947 S.E. 40TH ST. OCALA, FL 34479 US OCALA, FL 34480 US

FEI Number: 59-3093502 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:

TUMAN, JEFFREY P
4020 NE 19TH AVE.

OCALA, FL 34479 US

TUMAN, JEFFREY P
3947 S.E. 40TH ST.
OCALA, FL 34480 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: 02/14/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete Title: PRFS (X) Change () Addition TUMAN, JEFFREY P PRES. TUMAN, JEFFREY P PRES. Name: Name: 4020 N.E. 19TH AVE 3947 S.E. 40TH ST. Address: Address: City-St-Zip: OCALA, FL 34479 City-St-Zip: OCALA, FL 34480

Title: VP () Delete Title: () Change () Addition

 Name:
 TUMAN, JOHN G VP
 Name:

 Address:
 10557 S.E. 74TH TER.
 Address:

 City-St-Zip:
 BELLEVIEW, FL 34420
 City-St-Zip:

Title: SEC () Delete Title: () Change () Addition

 Name:
 TUMAN, NANCY L SEC
 Name:

 Address:
 10557 S.E. 74TH TER
 Address:

 City-St-Zip:
 BELLEVIEW, FL 34420
 City-St-Zip:

Title: TRES () Delete Title: TRES (X) Change () Addition Name: TUMAN, KATHLEEN M TRES Name: TUMAN, KATHLEEN M TRES

Address: 4020 NE 19 AVE. Address: 3947 S.E. 40TH ST. City-St-Zip: OCALA, FL 34479 City-St-Zip: OCALA, FL 34480

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: JEFFREY P. TUMAN PRES 02/14/2008