

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V38106

Entity Name: TENN. TEAM, INC.

FILED
Mar 27, 2008
Secretary of State

Current Principal Place of Business:

10 SE 4TH AVE
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

10 SE 4TH AVE.
DELRAY BCH, FL 33483 US

New Mailing Address:

10 SE 4TH AVE
DELRAY BEACH, FL 33483 US

FEI Number: 65-0331399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOWERY, ELOISE
10 SE 4TH AVE.
DELRAY BCH, FL 33483 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LOWERY, ELOISE
Address: 10 SE 4TH AVE.
City-St-Zip: DELRAY BCH, FL

Title: VST () Delete
Name: LOWERY, ELOISE
Address: 10 SE 4TH AVE.
City-St-Zip: DELRAY BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LOWERY, ELOISE
Address: 10 SE 4TH AVE.
City-St-Zip: DELRAY BCH, FL 33483 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ELOISE LOWERY

DP

03/27/2008

Electronic Signature of Signing Officer or Director

Date