

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000051039

**Entity Name:** TD/ER, INC.

**Current Principal Place of Business:**

9400 RIVER CROSSING BLVD., SUITE 102  
NEW PORT RICHEY, FL 34655

**Current Mailing Address:**

9400 RIVER CROSSING BLVD., SUITE 102  
NEW PORT RICHEY, FL 34655

**FEI Number:** 27-0377553

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DEEB, ALEX R  
9400 RIVER CROSSING BLVD., SUITE 102  
NEW PORT RICHEY, FL 34655 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D/P, TREASURER  
Name DEEB, ALEX R  
Address 9400 RIVER CROSSING BLVD., SUITE 102  
City-State-Zip: NEW PORT RICHEY FL 34655

Title D/VP  
Name MOODY, JONATHAN D  
Address 5837 MAIN ST.  
City-State-Zip: NEW PORT RICHEY FL 34652

Title DIRECTOR  
Name FLORIAN, JARED S  
Address 9400 RIVER CROSSING BLVD., SUITE 102  
City-State-Zip: NEW PORT RICHEY FL 34655

Title SECRETARY  
Name SINDELAR, MARJORIE H  
Address 9400 RIVER CROSSING BLVD., SUITE 102  
City-State-Zip: NEW PORT RICHEY FL 34655

*I hereby 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 all other like empowered.*

**SIGNATURE:** ALEX R. DEEB

**PRESIDENT**

**05/19/2016**

Electronic Signature of Signing Officer/Director Detail

Date