

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000007325

**Entity Name:** TYONEK SERVICES GROUP, INC.

**Current Principal Place of Business:**

1689 C STREET #219  
ANCHORAGE, AK 99501-5131

**Current Mailing Address:**

1689 C STREET #219  
ANCHORAGE, AK 99501-5131

**FEI Number: 20-1603684**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DIRECTOR  
Name GARBER, BART  
Address 1689 C STREET #219  
City-State-Zip: ANCHORAGE AK 99501-5131

Title PRESIDENT  
Name SHUFFLEBARGER, NEWMAN  
Address 1689 C STREET #219  
City-State-Zip: ANCHORAGE AK 99501-5131

Title DIRECTOR  
Name STANDIFER, JAISON  
Address 1689 C STREET #219  
City-State-Zip: ANCHORAGE AK 99501-5131

Title DIRECTOR, CHAIR  
Name WILLIFORD, SHARON  
Address 1689 C STREET #219  
City-State-Zip: ANCHORAGE AK 99501-5131

Title DIRECTOR  
Name MOON, SUSANNA L  
Address 1689 C STREET #219  
City-State-Zip: ANCHORAGE AK 99501-5131

Title DIRECTOR, SECRETARY,  
TREASURER  
Name MCCORD, EMIL J  
Address 1689 C STREET #219  
City-State-Zip: ANCHORAGE AK 99501-5131

Title VP  
Name MASON, SUSAN  
Address 1689 C STREET #219  
City-State-Zip: ANCHORAGE AK 99501-5131

*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: NEWMAN SHUFFLEBARGER**

**PRESIDENT**

**01/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date