2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2010
Secretary of State

DOCUMENT# P04000164287

Entity Name: 3-CORP. MANAGEMENT, INC.

Current Principal Place of Business:

453 COUNTY RD 489
LAKE PANASOFKEE, FL 33538

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 949
LAKE PANASOFKEE, FL 33538

New Mailing Address:

FEI Number: 04-3801563 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAUFLER, MONICA
1712 SE 35TH LN
OCALA, FL 34471 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: D
Name: HAUFLER, MONICA
Address: 453 COUNTY RD 489
City-St-Zip: LAKE PANASOFKEE, FL 33538

Title: D
Name: STRANGE, CHARLES E JR.
Address: 453 COUNTY RD 489
City-St-Zip: LAKE PANASOFKEE, FL 33538

Title: D
Name: ADAMS, SCOTT A
Address: 453 COUNTY RD 489
City-St-Zip: LAKE PANASOFKEE, FL 33538

Title: D
Name: DEAN, CHARLES S
Address: 453 COUNTY RD 489
City-St-Zip: LAKE PANASOFKEE, FL 33538

Title: D
Name: DEAN, CHARLES S JR
Address: 453 COUNTY RD 489
City-St-Zip: LAKE PANASOFKEE, FL 33538

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: MONICA HAUFLER D 01/31/2010

Electronic Signature of Signing Officer or Director Date