


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # 161484			
1. Entity Name TOWER DAIRY, INC.			
Principal Place of Business 1109 HUMMINGBIRD LANE BRANDON FL 33511 US		Mailing Address 1109 HUMMINGBIRD LANE BRANDON FL 33511 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E034 (10/07)

4. FEI Number 59-0631588		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  BUSCIGLIO, NORMAN 1169 HUMMINGBIRD LANE BRANDON FL 33511		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when constituting)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	BUSCIGLIO, JOHN A 2603 TRAPNELL RD EAST PLANT CITY FL 33566	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE STD	BUSCIGLIO, NORMAN 1109 HUMMINGBIRD LANE BRANDON FL 33511	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	U00000822945 02/20/08-80917-022 150.00
TITLE VP	ROMANO, JOSPEH R 2612 SHILO COURT VALRICO FL 33594	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE T	ROMANO, EDWIN F 3634 78TH ST SOUTH TAMPA FL 33619	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: *Norm Busciglio* Norman Busciglio 1/25/2008 F13-025-7251

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Mo/Yr