

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 13, 2007 08:00 AM
Secretary of State

DOCUMENT # 216886

1. Entity Name
TOWN 'N COUNTRY PARK, INC.



Principal Place of Business
**611 W BAY ST
TAMPA, FL 33606-2703 US**

Mailing Address
**611 W BAY ST
TAMPA, FL 33606-2703 US**



03012007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0857497

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SHIMBERG, JAMES H
611 W BAY ST
TAMPA, FL 33606-2703**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	SDT
NAME	SHIMBERG, AMY G
STREET ADDRESS	10102 WHITE TROUT LANE
CITY-ST-ZIP	TAMPA, FL 336184310

TITLE	PD
NAME	SHIMBERG, JAMES H
STREET ADDRESS	10102 WHITE TROUT LANE
CITY-ST-ZIP	TAMPA, FL 336184310

TITLE	VD
NAME	SHIMBERG, JAMES H JR.
STREET ADDRESS	1912 ARDSLEY ST.
CITY-ST-ZIP	TAMPA, FL 33629

TITLE	D
NAME	PAIKOFF, NANCY S
STREET ADDRESS	60 STANTON CIRCLE
CITY-ST-ZIP	OLDSMAR, FL 34677

TITLE	D
NAME	SHIMBERG, ROBERT A
STREET ADDRESS	3214 W. FOUNTAIN
CITY-ST-ZIP	TAMPA, FL 33609

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/23/07-80008-007 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empowered.

SIGNATURE:

James H Shimberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/07
Date

254-7567
Daytime Phone #