

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 276674

FILED  
Jan 10, 2004  
Secretary of State

Entity Name: TOWN AND COUNTRY INDUSTRIES,INC.

**Current Principal Place of Business:**

400 W MCNAB RD  
FORT LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

**Current Mailing Address:**

400 W MCNAB RD  
FORT LAUDERDALE, FL 33309 US

**New Mailing Address:**

FEI Number: 59-1034317      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

O'CONNOR, TIMOTHY  
400 W MCNAB RD  
FORT LAUDERDALE, FL 33309 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: PD ( ) Delete  
Name: OCONNOR, TIMOTHY,  
Address: 2645 N E 24TH STREET  
City-St-Zip: LIGHTHOUSE POINT, FL

Title: VD ( ) Delete  
Name: OCONNOR, LINDA,  
Address: 2645 NE 24 ST  
City-St-Zip: LIGHTHOUSE PT, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: OCONNOR, TIMOTHY,  
Address: 2645 N E 24TH STREET  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: VD (X) Change ( ) Addition  
Name: OCONNOR, LINDA,  
Address: 2645 NE 24 ST  
City-St-Zip: LIGHTHOUSE PT, FL 33064

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TIMOTHY OCONNOR

P

01/10/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date