## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000003673

Entity Name: TROY PROPERTIES, INC.

FILED Jan 11, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

217 TRELLIS WALK 155 ST. JOHNS BUSINESS PLACE CENTERVILLE, GA 31028

SUITE 201

ST. AUGUSTINE, FL 32095

**Current Mailing Address: New Mailing Address:** 

155 ST. JOHNS BUSINESS PLACE SUITE 201

ST. AUGUSTINE, FL 32092

FEI Number: 58-2210679 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HILBERT, TINA LOUISE HILBERT, JOHN C 235 CRANES LAKE DRIVE 3063 WILLIAMSBURG CT. PONTE VEDRA BEACH, FL 32082 ORANGE PARK, FL 32065 US 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: JOHN C. HILBERT 01/11/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

HILBERT, JOHN TROY HILBERT, JOHN T Name: Name: Address: Address:

217 TRELLIS WALK 1808 W. COBBLESTONE LN. City-St-Zip: CENTERVILLE, GA 31028 City-St-Zip: ST. AUGUSTINE, FL 32092

( ) Delete Title: ٧S Title: ٧S (X) Change ( ) Addition Name: HILBERT, CLAUDINE Name: HILBERT, CLAUDINE

217 TRELLIS WALK Address: 1808 W. COBBLESTONE LN Address: CENTERVILLE, GA 31028 ST. AUGUSTINE, FL 31028 City-St-Zip: City-St-Zip:

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: JOHN T. HILBERT **PRES** 01/11/2005