2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2008
Secretary of State

DOCUMENT# F01000002749

Entity Name: TOWNE AND COUNTRY INVESTMENTS, INC.

Current Principal Place of Business:

3511 SADDLE BROOK DR
TRINITY, NC 273707769

New Principal Place of Business:

Current Mailing Address:

4205 ORTEGA FOREST BLVD
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 56-0949377 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURPHY, ROSEMARY P
4205 ORTEGA FOREST BLVD.
JACKSONVILLE, FL 32210 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: CP ( ) Delete
Name: PLYLER, RUTH H
Address: 4531-1 SUSSEX AVE.
City-St-Zip: JACKSONVILLE, FL 32210

Title: VCV ( ) Delete
Name: PLYLER, MICHAEL H
Address: 3511 SADDLEBROOK DR.
City-St-Zip: TRINITY, NC 27370

Title: DS ( ) Delete
Name: PLYLER, CRANFORD O III
Address: 610 WILLOW DR
City-St-Zip: THOMASVILLE, NC 27360

Title: DT ( ) Delete
Name: MURPHY, ROSEMARY P
Address: 4205 ORTEGA FOREST BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

Title: DS ( ) Delete
Name: PLYLER, DAVID C
Address: 4730 PRINCE EDWARD RD
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROSEMARY P. MURPHY TREA 04/02/2008
Electronic Signature of Signing Officer or Director — Date