

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000042

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: TRI-COUNTY REAL ESTATE HOLDINGS, INC.

**Current Principal Place of Business:**

530 EAST WADE STREET  
TRENTON, FL 32693

**New Principal Place of Business:**

**Current Mailing Address:**

530 EAST WADE STREET  
TRENTON, FL 32693

**New Mailing Address:**

FEI Number: 56-2326443

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCELROY, MICHAEL  
530 EAST WADE STREET  
TRENTON, FL 32693 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: HORTMAN, EDWIN W  
Address: 24 SECOND AVENUE SOUTHEAST  
City-St-Zip: MOULTRIE, GA 31768

Title: S ( ) Delete  
Name: LEWIS, CINDI  
Address: 24 SECOND AVENUE SOUTHEAST  
City-St-Zip: MOULTRIE, GA 31768

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

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: MICHAEL MCELROY

PRES

03/20/2009

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

\_\_\_\_\_  
Date