

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # F31690

1. Entity Name  
TWC MARKETING & DEVELOPMENT, INC.



**FILED  
Aug 08, 2005 8:00 am  
Secretary of State**

07-07-2005 90003 002 \*\*\*150.00

66025517

Principal Place of Business 296 BAYSHORE DRIVE NICEVILLE, FL 32578		Mailing Address 36474A EMERALD COAST PKWY SUITE 1201 DESTIN, FL 32541																																										
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 296 Bayshore Dr. Suite, Apt. #, etc.																																										
City & State NICEVILLE, FL		4. FEI Number 59-2346659																																										
Zip 32578	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																										
6. Name and Address of Current Registered Agent CURRID, TOMMY W 296 BAYSHORE DRIVE NICEVILLE, FL 32578		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																										
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.																																												
<p><b>SIGNATURE</b> <small>Signature, typed or printed name of registered agent and title if applicable.</small> <small>NOTE: Registered Agent signature required when resuming</small> <small>DATE</small></p> <table border="1"> <tr> <td>FILE NOW!! FEE IS \$150.00 Due by September 7, 2005</td> <td>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fee</td> <td>In accordance with s. 607.103(2)(b), F.S., the corporation did not receive the prior notice.</td> </tr> </table> <p>10. <b>OFFICERS AND DIRECTORS</b></p> <table border="1"> <thead> <tr> <th colspan="2">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <th>TITLE NAME STREET ADDRESS CITY-ST-ZP</th> <th>□ Delete</th> <th>TITLE NAME STREET ADDRESS CITY-ST-ZP</th> <th>□ Change <input type="checkbox"/> Addition</th> </tr> </thead> <tbody> <tr> <td>DP CURRID, TOMMY W 296 BAYSHORE DRIVE NICEVILLE, FL 32578</td> <td>□ Delete</td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZP</td> <td>□ Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>□ Delete</td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZP</td> <td>□ Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>□ Delete</td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZP</td> <td>□ Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>□ Delete</td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZP</td> <td>□ Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>□ Delete</td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZP</td> <td>□ Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>□ Delete</td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZP</td> <td>□ Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>□ Delete</td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZP</td> <td>□ Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>□ Delete</td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZP</td> <td>□ Change <input type="checkbox"/> Addition</td> </tr> </tbody> </table> <p>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 it 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 007, 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 info unpowered.</p> <p><b>SIGNATURE:</b> <i>[Signature]</i></p> <p><small>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 it 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 007, 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 info unpowered.</small></p>				FILE NOW!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fee	In accordance with s. 607.103(2)(b), F.S., the corporation did not receive the prior notice.	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition	DP CURRID, TOMMY W 296 BAYSHORE DRIVE NICEVILLE, FL 32578	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	□ Change <input type="checkbox"/> Addition
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6/30/05 850-897-4964

Centex Phone #

# ATTACHMENT

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O'SULLIVAN CREEL, LLP

Certified Public Accountants & Consultants

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Suite 1201  
P. O. Box 1469  
Destin, FL 32540

850.837.0398  
Fax: 850.837.4583

[www.osullivancreel.com](http://www.osullivancreel.com)

Florida Department of State  
Divisions of Corporations  
P O Box 6327  
Tallahassee, FL 32314

July 29, 2005

RE: F31690

Dear Sir/Madam:

We are responding to your letter dated July 11, 2005, a copy of which is attached. Unfortunately, our client, TWC Marketing & Development, Inc., did not receive notification of the UBR filing requirement in the mail. At the point in time they received the late notice, they promptly filed the return and paid the required filing fee. This corporation has historically filed and paid their UBR timely and have now put into place a reminder so that this will not get overlooked again. Therefore, we respectfully request that you abate the late filing penalty of \$400.00.

Sincerely

*O'Sullivan Creel, LLP*  
Certified Public Accountants & Consultants

Lori K. Kelley, CPA  
Partner