


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # F94000005721	
1. Entity Name TOWER CONSULTANTS EXECUTIVE SEARCH, INC.	

Principal Place of Business 782 SPRINGDALE DR. 110 EXTON, PA 19341 US	Mailing Address 943 CENTRAL PKWAY STUART, FL 34994-3904 US
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01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 23-2536530	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FRIEDMAN, DONNA 4650 N.E. SPINNAKER POINT PLACE STUART, FL 34996

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IN THIS SPACE**

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.

SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD FRIEDMAN, DONNA 4650 N.E. SPINNAKER POINT PLACE STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD REGAN, THOMAS 4650 NE SPINNAKER POINT PL STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEHART-HEGARTY, DONNA 9 PHILLIPS LANE CHESTER SPRINGS, PA 19425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/24/05-80181-012 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Donna L. Friedman**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: Jan 7, 2005 Daytime Phone #: 772-288-3590