

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001334

Entity Name: MOUNTAIN TOWER, LTD., INC.

FILED  
Jul 11, 2006  
Secretary of State

## Current Principal Place of Business:

160 SOSEBEE LANE  
DEMAREST, GA 30535 US

## New Principal Place of Business:

8910 DICKS HILL PARKWAY  
TOCCOA, GA 30577 US

## Current Mailing Address:

PO BOX 127  
DEMAREST, GA 30535 US

## New Mailing Address:

8910 DICKS HILL PARKWAY  
TOCCOA, GA 30577 US

FEI Number: 14-1714829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DONOHUE, DONNA  
110 MAGNOLIA AVE.  
EDGEWATER, FL 32132 US

## Name and Address of New Registered Agent:

DONOHUE, DONNA M  
110 MAGNOLIA AVE.  
EDGEWATER, FL 32132 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: DONNA DONOHUE

07/11/2006

Electronic Signature of Registered Agent

Date

## Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCT ( ) Delete  
Name: MONCURE, MOLLY  
Address: 8910 DICKS HILL PARKWAY  
City-St-Zip: TOCCOA, GA 30577

Title: VCVS ( ) Delete  
Name: MONCURE, PETER W  
Address: 8910 DICKS HILL PARKWAY  
City-St-Zip: TOCCOA, GA 30577

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCT (X) Change ( ) Addition  
Name: MONCURE, MOLLY A  
Address: 1097 STARMOUNT TRAIL  
City-St-Zip: CLARKESVILLE, GA 30523

Title: VCVS (X) Change ( ) Addition  
Name: MONCURE, PETER W  
Address: 1097 STARMOUNT TRAIL  
City-St-Zip: CLARKESVILLE, GA 30523

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: MOLLY MONCURE

PRES

07/11/2006

Electronic Signature of Signing Officer or Director

Date