## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G54197

Entity Name: TOWN CENTRE, INC.

FILED Aug 23, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

% ROBERT B. KOEHNEMANN% ROBERT B. KOEHNEMANN445 GRACE AVE.459 GRACE AVE.SUITE 101PANAMA CITY, FL 32401PANAMA CITY, FL 32401

Current Mailing Address: New Mailing Address:

% ROBERT B. KOEHNEMANN
445 GRACE AVE.

PANAMA CITY, FL 32401

% ROBERT B. KOEHNEMANN
459 GRACE AVENUE, SUITE 101
LYNN HAVEN, FL 32401

FEI Number: 59-2301398 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KOEHNEMANN, ROBERT B.
445 GRACE AVE.

PANAMA CITY, FL 32401

KOEHNEMANN, ROBERT B.
459 GRACE AVENUE
PANAMA CITY, FL 32401

KOEHNEMANN, ROBERT B.
459 GRACE AVENUE
PANAMA CITY, FL 32401

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: ROBERT B. KOEHNEMANN 08/23/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: SD () Delete Title: () Change () Addition

 Name:
 KOEHNEMANN, LYNN C.,
 Name:

 Address:
 445 GRACE AVE.
 Address:

 City-St-Zip:
 PANAMA CITY, FL
 City-St-Zip:

Title: PD () Delete Title: () Change () Addition

 Name:
 KOEHNEMANN, ROBERT B,
 Name:

 Address:
 445 GRACE AVE.
 Address:

 City-St-Zip:
 PANAMA CITY, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT B KOEHNEMANN PD 08/23/2004

The corporation has indicated in accordance with s. 607.193(2)(b), F.S., it did not receive the prior notice. They have requested the late fee be waived.