2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006
Secretary of State

DOCUMENT# G54197

Entity Name: TOWN CENTRE, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

% ROBERT B. KOEHNEMANN
455 GRACE AVENUE
PANAMA CITY, FL 32401

Current Mailing Address:

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

New Mailing Address:

% ROBERT B. KOEHNEMANN
P.O. BOX 660
PANAMA CITY, FL 32402

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

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

KOEHNEMANN, ROBERT B.
455 GRACE AVENUE
PANAMA CITY, FL 32401 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: 01/13/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: KOEHNEMANN, LYNN C.,
Address: 445 GRACE AVE.
City-St-Zip: PANAMA CITY, FL

Title: PD ( ) Delete
Name: KOEHNEMANN, ROBERT B,
Address: 445 GRACE AVE.
City-St-Zip: PANAMA CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: KOEHNEMANN, LYNN C.,
Address: 455 GRACE AVE.
City-St-Zip: PANAMA CITY, FL

Title: PD (X) Change ( ) Addition
Name: KOEHNEMANN, ROBERT B,
Address: 455 GRACE AVE.
City-St-Zip: PANAMA CITY, FL

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT KOEHNEMANN PRES 01/13/2006
Electronic Signature of Signing Officer or Director Date