


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 8:00 am
Secretary of State

03-31-2005 90047 044 ***150.00

DOCUMENT # K64351 1. Entity Name T O C MANAGEMENT, INC.	
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Principal Place of Business % GERADO MENDEZ, JR. 2471 JENNIFER HOPE BLVD. LONGWOOD, FL 32779	Mailing Address % GERADO MENDEZ, JR. 2471 JENNIFER HOPE BLVD. LONGWOOD, FL 32779
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DO NOT WRITE IN THIS SPACE



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2930664	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

MENDEZ, GERARDO, JR.
2471 JENNIFER HOPE BLVD.
LONGWOOD, FL 32779

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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 _____ (NOTE: Registered Agent signature required when rematuring) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MENDEZ, GERADO, JR. 2471 JENNIFER BLVD. LONGWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS RUSSELL, HELEN T 229 E RIDGEWOOD ALTAMONTE SPGS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VALENTIN, ELISA 213 E ALPINE ST ALTAMONTE SPRGS, FL
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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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: *Gerardo Mendez Jr.* **3/27/05** **47-788-0491**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #