

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M96297

Entity Name: TWIN PALMS, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

650 MAYTOWN RD
PO BOX 250
OSTEEN, FL 32764

New Principal Place of Business:

650 MAYTOWN RD
OSTEEN, FL 32764

Current Mailing Address:

650 MAYTOWN RD
PO BOX 250
OSTEEN, FL 32764

New Mailing Address:

650 MAYTOWN RD
OSTEEN, FL 32764

FEI Number: 59-2913242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REISINGER, CLARK B.
650 MAYTOWN RD
OSTEEN, FL 32764 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: REISINGER, CLARK B.,
Address: 650 MAYTOWN ROAD
City-St-Zip: OSTEEN, FL

Title: T () Delete
Name: REISINGER, CLARK B.,
Address: 650 MAYTOWN ROAD
City-St-Zip: OSTEEN, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CLARK REISINGER

PRES

04/30/2004

Electronic Signature of Signing Officer or Director

Date