2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007945

City-St-Zip:

FILED Apr 29, 2008 Secretary of State

Entity Name: TOWN CENTER OF TOMORROW, INC. **Current Principal Place of Business: New Principal Place of Business:** 740 DURION CT. SANIBEL, FL 33957 **Current Mailing Address: New Mailing Address:** 740 DURION CT SANIBEL, FL 33957 FEI Number: 26-0301701 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: PLATT, DAVID M 1648 PERIWINKLE WAY, STE. B SANIBEL, FL 33957 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete (X) Change () Addition PICKER, SYDNEY JR PICKER, SIDNEY JR Name: Name: 250 HURRICANE LANE Address: 250 HURRICANE LANE Address: City-St-Zip: SANIBEL, FL 33957 US City-St-Zip: SANIBEL, FL 33957 US Title: Title: () Change (X) Addition () Delete Name: Name: KAPLAN, ALVIN Address: Address: 740 DURION CT City-St-Zip: City-St-Zip: SANIBEL, FL 33957 US Title: () Delete Title: () Change (X) Addition PICKER, JANE M Name: Name: 250 HURRICANE LANE Address: Address: City-St-Zip: City-St-Zip: SANIBEL, FL 33957 US Title: () Delete Title: SECY () Change (X) Addition Name: Name: KAPLAN, MIRIAM 740 DURION CT Address: Address: City-St-Zip: City-St-Zip: SANIBEL, FL 339957 US Title: () Delete Title: () Change (X) Addition DIX, DANIEL V Name: Name: 9070 SPRING MOUNTAIN WAY Address: Address:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: SIDNEY PICKER, JR. **PRES** 04/29/2008

FT. MYERS, FL 33908 US