2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30298

Entity Name: HALLS OF TARA, INC.

FILED Jan 20, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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C/O WILLIAM C. PURCELL 633 S. ANDREWS AVENUE, SECOND FLOOR FORT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

C/O E. EDW. MEEHAN
22 CAYUGA RD.
C/O C. EDW. MEEHAN
22 CAYUGA RD.

FORT LAUDERDALE, FL 33308 US FORT LAUDERDALE, FL 33308 US

FEI Number: 65-0114100 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:

MEEHAN C EDWARD 22 CAYUGA RD. MEEHAN, C. EDWARD 22 CAYUGA RD.

FT. LAUDERDALE, FL 33308 US FT. LAUDERDALE, FL 33308 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: C. EDWARD MEEHAN 01/20/2004

Electronic Signature of Registered Agent Date

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

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

 Name:
 MEEHAN, C. EDWARD,
 Name:

 Address:
 22 CAYUGA RD.
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL
 City-St-Zip:

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

 Name:
 PURCELL, WILLIAM C.,
 Name:

 Address:
 633 S.ANDREWS AVE.,3FL
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 MEEHAN, SHERRY R.,
 Name:

 Address:
 22 CAYUGA RD.
 Address:

 City-St-Zip:
 FT. LAUDERDALE, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. EDWARD MEEHAN PD 01/20/2004