

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32913

Entity Name: TBJVC, INC.

FILED  
Sep 02, 2004  
Secretary of State

**Current Principal Place of Business:**

2812 PRICE AVE.  
TAMPA, FL 33611 US

**New Principal Place of Business:**

**Current Mailing Address:**

2812 PRICE AVE.  
TAMPA, FL 33611 US

**New Mailing Address:**

FEI Number: 59-2998480

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAGOSTINO, RAMON RANDY  
2812 PRICE AVE.  
TAMPA, FL 33611 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DAGOSTINO, RAMON RANDY  
Address: 2812 PRICE AVE.  
City-St-Zip: TAMPA, FL 33611

Title: T (X) Delete  
Name: O'CARROLL, EDMUND  
Address: 5108 N SEMINOLE AVE.  
City-St-Zip: TAMPA, FL 33603

Title: D ( ) Delete  
Name: O'CARROLL, MELANEY  
Address: 5108 N SEMINOLE AVE.  
City-St-Zip: TAMPA, FL 33603

Title: S ( ) Delete  
Name: DAGOSTINO, LAURI  
Address: 2812 PRICE AVE.  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: NORMAN, MARGARET  
Address: 1302 HOLIDAY DRIVE  
City-St-Zip: BRANDON, FL 33510

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

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

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

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

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

SIGNATURE: LAURI DAGOSTINO

D

09/02/2004

Electronic Signature of Signing Officer or Director

Date