2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State
04-29-2004 90279 045 ****61.25

DOCUMENT # N92000000707

1. Entity Name
TOWNCENTER AGENCY, INC.

Principal Place of Business	Mailing Address
C/O CITY OF ATLANTIC BEACH 800 SEMINOLE ROAD ATLANTIC BEACH, FL 32233 US	C/O CITY OF ATLANTIC BEACH 800 SEMINOLE ROAD ATLANTIC BEACH, FL 32233 US

04072004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	2043 Marye Brant Loop N. Suite, Apt. #, etc.
City & State	City & State: Neptune Bch, FL
Zip / Country	Zip: 32266 Country: Duval

4. FEI Number: 59-3158509 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FLETCHER, LYMAN T
541 E. MONROE STREET
JACKSONVILLE, FL 32202

7. Name and Address of New Registered Agent

Name: JANINE PAPPAS.
Street Address (P.O. Box Number is Not Acceptable): 2043 N. Marye BRANDT LOOP.
City: NEPTUNE BEACH FL Zip Code: 32266.

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: Janine M Pappas Janine Pappas, Treasurer 4/28/04
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHIEGG, RENE ONE OCEAN BLVD ATLANTIC BEACH, FL 32233	☒ Delete	T. D. JANINE PAPPAS 2043 N.M. BRANDT LOOP NEPTUNE BEACH FL. 32266	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. P. FALOON, NEIL 1717 BEACH AVE ATLANTIC BEACH, FL 32277	☐ Delete	D SYLVIA SIMMONS 211 BEACH AVE. ATLANTIC BEACH. FL. 32233	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FLETCHER, LYMAN T 541 E MONROE ST JACKSONVILLE, FL 32222	☒ Delete	MAUREEN SHAUGHNESSY 361 MAIN ST ATLANTIC BEACH. FL. 32233.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ D WATERS, DEZMOND 1835 SEMINOLE RD ATLANTIC BEACH, FL 32233	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. V.P. ROBERTS, AMY 204 FLORIDA BLVD NEPTUNE BEACH, FL 32266	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VPD~~ D BISHOP, PATSY 544 OCEAN BLVD ATLANTIC BEACH, FL 32233	☐ Delete		☐ Change ☐ Addition

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 617, 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: Janine M Pappas Janine Pappas, Treasurer 4/28/04 904-905-7049
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #