## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000003715

Entity Name: TOWN & COUNTRY ALLIANCE, INC.

FILED Aug 24, 2006 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
7512 PAUL 105 TAMPA, FL				
·	ailing Address:	New Maili	New Mailing Address:	
PO BOX 26 SUITE 111	_	new main	ng Address.	
	59-3267277 FEI Number Applied For() FEI N e with s. 607.193(2)(b), F.S., the corporation did not receive Address of Current Registered Agent:			
SUITE 111	EVEN P NDERSON BLVD SUITE 150 . 33609 US		NE 580 WEST , FL 34677 US	
The above r in the State	named entity submits this statement for the purpose of Florida.	of changing i	ts registered office or registered agent, or both,	
SIGNATURE: DIANE PAUL			08/24/2006	
	Electronic Signature of Registered Agent		Date	
OFFICERS	AND DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SD (X) Delete PRYSNER, PAMELA 10350 ABBOTSFORD DR TAMPA, FL 336261715	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (X) Delete SMITH, JOYCE 7201 DAIQUIRI LANE TAMPA, FL 33634	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C () Delete LEWIS JR, CARLTON 9510 LETTERSTONE CT TAMPA, FL 336151972	Title: Name: Address: City-St-Zip:	VC (X) Change ( ) Addition LEWIS JR, CARLTON 9510 LETTERSTONE CT TAMPA, FL 336151972	
Title: Name: Address: City-St-Zip:	S (X) Delete CRAWFORD, ED 8908 BEELER DRIVE TAMPA, FL 336262912	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () Delete VICKERS, LAURA 9304 FLORA ST. WEST TAMPA, FL 33615	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete ROOE, BILL 4725 EL DORADO DR. TAMPA, FL 33615	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BROWNE, BILL 4725 EL DORADO DR. TAMPA, FL 33615	

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: LAURA VICKERS TR 08/24/2006