2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000008565

Address:

City-St-Zip:

FILED Nov 05, 2007 Secretary of State

Entity Nai	me: TT OF N	SB, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	TH DIXIE HIG RNA BEACH					
Current Mailing Address:			New Mailing Address:			
SUITE P-4	AGLER DR. 100 LM BEACH, F	L 33401				
FEI Number:	: 65-0983038	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
SUITE P-4	AGLER DR.	L 33401 US				
	named entity e of Florida.	submits this statement for the	purpose of changing it	ts registered office or registered agent, or both,		
SIGNATU	RE:					
	Electro	nic Signature of Registered Aલ	gent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	TAYLOR, TER 515 N. FLAGL) Delete RY ER DR., STE. P-400 BEACH, FL 33401	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	HOLCOMB, JA 1300 NORTH I) Delete CK DIXIE HIGHWAY BEACH, FL 32168	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	LACY, JOHN 515 N. FLAGE) Delete R DR., STE. P400 BEACH, FL 33401	Title: Name: Address: City-St-Zip:	S (X) Change () Addition CERA, NANCY 515 N. FLAGER DR., STE. P400 WEST PALM BEACH, FL 33401		
Title: Name:	() Delete	Title: Name:	AS () Change (X) Addition PROIA, JEANNE		

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

Address: City-St-Zip:

SIGNATURE: TERRY TAYLOR PD 11/05/2007

515 N. FLAGER DR., STE. P400

WEST PALM BEACH, FL 33401