

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 25, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000076540

1. Entity Name
TOWER PARK, INC.



Principal Place of Business
20991 NE HWY 27
WILLISTON, FL 32696

Mailing Address
4351 NE 176TH AVE
WILLISTON, FL 32696



03072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FCI Number
59-3665314
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHAMBERLAIN, STEVEN M
618 NE FIRST STREET
GAINESVILLE, FL 32601

DO NOT WRITE
IN THIS SPACE

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 _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HODGE, EDWARD C
STREET ADDRESS	4351 NE 176TH AVE
CITY ST ZIP	WILLISTON, FL 32696
TITLE	S
NAME	HODGE, JULIE
STREET ADDRESS	4351 NE 176TH AVE
CITY ST ZIP	WILLISTON, FL 32696
TITLE	T
NAME	HODGE, CHRISTINE
STREET ADDRESS	P O BOX 221
CITY ST ZIP	WILLISTON, FL 32696
TITLE	M
NAME	HODGE, JOHN
STREET ADDRESS	P O BOX 221
CITY ST ZIP	WILLISTON, FL 32696
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

000000532274
05/06/06-80076-017 150.00

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward C Hodge
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/06

Date

Do Not Print