

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000098436

FILED
Mar 06, 2008
Secretary of State

Entity Name: TOWN CENTER O-L I, INC.

Current Principal Place of Business:

780 FISHERMAN STREET
3RD FLOOR
OPA-LOCKA, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

780 FISHERMAN STREET
3RD FLOOR
OPA-LOCKA, FL 33054 US

New Mailing Address:

FEI Number: 65-1095534 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

TOWN CENTER MANAGEMENT
780 FISHERMAN ST
OPA LOCKA, FL 33054 US

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: DENNIS STACKHOUSE

03/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: STACKHOUSE, DENNIS C
Address: 780 FISHERMAN STREET, 3RD FLOOR
City-St-Zip: OPA-LOCKA, FL 33054 US

Title: VP () Delete
Name: STACKHOUSE, LYNDIA
Address: 780 FISHERMAN STREET, 3RD FLOOR
City-St-Zip: OPA-LOCKA, FL 33054

Title: DS () Delete
Name: DURHAM, FREDRIC
Address: 780 FISHERMAN STREET, 3 RD FLOOR
City-St-Zip: OPA-LOCKA, FL 33054 US

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:

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.

SIGNATURE: DENNIS STACKHOUSE

DPT

03/06/2008

Electronic Signature of Signing Officer or Director

Date