2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 27, 2007 08:00 AM Secretary of State

| ANNUAL REPORT | | | reu 27, 2007 00:00 | | |
|---|--|--------------------------|---|--|--|
| DOCUMENT # P00000 1. Enlity Name 21TC, INC. | 0110619 | | | Seci | retary of Stat |
| Principal Place of Business 2026 CRYSTALWOOD DRIVE LAKELAND, FL 33801 | Mailing Address PO BOX 2805 LAKELAND, FL 33806 | | | RII Be ili Be ili Be ili Beil i 200 | 5 1021 100 10 10 10 10 10 |
| | ITE IN THIS SPA | ACE | 02072007 4. FEI Number 59-36852 5. Certificate of | No Chg-P C | R2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required |
| 6. Name and Address of DOCKERY, CHARLES C 2026 CYRSTALWOOD DRIVE LAKELAND, FL 33801 | Current Registered Agent | | | NOT WRI | |
| The above named entity submits this state the obligations of registered agent. SIGNATURE Signature, typed or printed name of regist | | stered office or registe | | | I am familiar with, and accept |
| FILE NOW!!! FEE IS \$150 After May 1, 2007 Fee will be | | | .00 May Be led to Fees | | |
| 10. OFFICE IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | RS AND DIRECTORS RIVE | | DO N | U00000065 03/08/07-80 NOT WRI HIS SPA | |
| STREET ADDRESS CITY-SI-ZIP | | | | | |

12. I hereby certify that the information supplied with this filing does not quality 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 only, that I am an officer or director of the corporation or the receiver or trustee empowered to execute his 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 oper like empowered.

TITLE

STREET ADDRESS

SIGNATURE: 🚣

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

911 ,863-665-6252