

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002806

FILED
Mar 24, 2009
Secretary of State

Entity Name: TRS OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

526 POCAHONTAS DR.
FT. WALTON BEACH, FL 32547

New Principal Place of Business:

526 POCAHONTAS DR.
FT. WALTON BEACH, FL 32547 US

Current Mailing Address:

526 POCAHONTAS DR.
FT. WALTON BEACH, FL 32547

New Mailing Address:

526 POCAHONTAS DR.
FT. WALTON BEACH, FL 32547 US

FEI Number: 59-3056500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWLESS, TONY
526 POCAHONTAS DR.
FT. WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

LAWLESS, TONY D
526 POCAHONTAS DR.
FT. WALTON BEACH, FL 32547 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: TONY LAWLESS

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LAWLESS, JEANNIE
Address: 526 POCAHONTAS DR.
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: D () Delete
Name: LAWLESS, TONY
Address: 526 POCAHONTAS DR.
City-St-Zip: FT. WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LAWLESS, JEANNIE
Address: 526 POCAHONTAS DR.
City-St-Zip: FT. WALTON BEACH, FL 32547 US

Title: D (X) Change () Addition
Name: LAWLESS, TONY
Address: 526 POCAHONTAS DR.
City-St-Zip: FT. WALTON BEACH, FL 32547 US

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: TONY LAWLESS

D

03/24/2009

Electronic Signature of Signing Officer or Director

Date