2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010021

Entity Name: TRI COUNTY COMPUTERS, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

2310 TAMIAMI TRAIL SUITE 3109 PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

3524 S.E. FIRST AVENUE
CAPE CORAL, FL 33904

2310 TAMIAMI TRAIL
SUITE 3109
PUNTA GORDA, FL 33950

FEI Number: 65-1065869 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOHL, ETTA R

3910 COUNTRY CLUB BOULEVARD

CAPE CORAL, FL 33904 US

JONES, MICHAEL

29527 POPLAR DR.
PUNTA GORDA, FL 33982

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: MICHAEL JONES 04/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: D () Delete Title: () Change () Addition
Name: JONES, MICHAEL R Name:
Address: 29527 POPLAR DR Address:

 Address:
 29527 POPLAR DR
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33982
 City-St-Zip:

Title: V () Delete Title: V (X) Change () Addition Name: QUESTNBERRY, DEAN Name: LEYEZA, MANUEL

Address: 2212 CRYSTAL DR Address: 1125 EDMUND ST.
City-St-Zip: FORT MYERS, FL 33909 City-St-Zip: PUNTA GORDA, FL 33950

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL JONES PRES 04/30/2004