2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000030201

FILED Apr 18, 2007 Secretary of State

Entity Name: TOWNE CENTER PROPERTIES, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
600 HAVERFORD ROAD SUITE G101 HAVERFORD, PA 19041						
Current Mailing Address:				New Mailing Address:		
SUITE G10	RFORD ROA)1 •RD, PA 1904					
FEI Number:	23-2748442	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
FRAZIER, ROBERT W JR. 2400 E. COMMERCIAL BLVD., SUITE 826 FT. LAUDERDALE, FL 33308 US				BELMONT INVESTMENT CORP. 1675 MARKET ST. SUITE 207 WESTON, FL 33326 US		
	named entity of Florida.	submits this statement for the	purpose o	of changing it	s registere	d office or registered agent, or both,
SIGNATURE: PETER A MARDINLY				04/18/2007		
	Electro	nic Signature of Registered Ac	gent			Date
Election Can	npaign Financir	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BELMONT, BA	RFORD ROAD, SUITE G101		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	VD (BELMONT, GO 76245 FAIRW. INDIAN WELL	AY DR.		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	TD (GRESSEN, JA 17613-D ASHE BOCA RATON	OURNE LANE		Title: Name: Address: City-St-Zip:	TD GRESSEN, 6102 S. E. G STUART, FI	DAKMONT PLACE
Title:	V () Delete		Title:	VP	(X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: PETER A MARDINLY VΡ 04/18/2007

MARDINLY, PÉTER A ESQ

HAVERFORD, PA 19041 US

C/O 600 HAVERFORD ROAD, SUITE G101

Name:

Address:

City-St-Zip:

MARDINLY, PETER A ESQ

HAVERFORD, PA 19041 US

C/O 600 HAVERFORD ROAD, SUITE G101