2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000050600

Name: TOW/MASTERS OF PORT STILLICIE IN

FILED Jul 26, 2007 Secretary of State

Entity Nar	ne: TOWMAS	TERS OF PORT ST. LUCIE, I	NC.		
Current Pi	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
	BILTMORE ST LUCIE, FL 349	83			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	BILTMORE ST. LUCIE, FL 349	83			
FEI Number:	59-3722249	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	ARY E BILTMORE ST. LUCIE, FL 349	83 US			
	named entity s of Florida.	ubmits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,	
SIGNATUF					
	Electroni	c Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSTD () RICKS, MARY 1325 SW BILTM		Title: Name: Address: CitysSt-Zip:	()Change ()Addition	

Address: 1325 SW BILTMORE ST.
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: () Delete Title: VP () Change (X) Addition
Name: RICKS, WILLIAM O
Address: 1325 SW BILTMORE ST
City-St-Zip: City-St-Zip: PORT ST LUCIE, FL 34983

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: MARY RICKS PSTD 07/26/2007