## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000064973

Entity Name: T.G.M.W, INC.

FILED Feb 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

843 LOGGERHEAD IS DRIVE 870 HAWKSBILL ISLAND DRIVE SATELLITE BEACH, FL 32937 SATELLITE BEACH, FL 32937

Current Mailing Address: New Mailing Address:

843 LOGGERHEAD IS DRIVE 870 HAWKSBILL ISLAND DRIVE SATELLITE BEACH, FL 32937 SATELLITE BEACH, FL 32937

FEI Number: 59-3730913 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:

CRONIN, MARIAM

843 LOGGERHEAD IS DRIVE

SATELLITE BEACH, FL 32937 US

CRONIN, MARIAM

870 HAWKSBILL ISLAND DRIVE

SATELLITE BEACH, FL 32937 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: 02/26/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: KARTZINEL, WAYNE Name: KARTZINEL, WAYNE
Address: 843 LOGGERHEAD IS DRIVE Address: 870 HAWKSBILL ISLAND DRIVE

Address: 843 LOGGERHEAD IS DRIVE Address: 870 HAWKSBILL ISLAND DRIVE City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: SATELLITE BEACH, FL 32937

 Name:
 CRONIN, MIRIAM JEAN
 Name:
 CRONIN, MIRIAM JEAN

 Address:
 843 LOGGERHEAD IS DRIVE
 Address:
 870 HAWKSBILL ISLAND DRIVE

 City-St-Zip:
 SATELLITE BEACH, FL 32937
 City-St-Zip:
 SATELLITE BEACH, FL 32937

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: MARIAM CRONIN DR 02/26/2004