

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000085871

**FILED**  
**Mar 02, 2009**  
**Secretary of State**

**Entity Name:** TUSKAWILLA CORPORATE GENERAL TS, INC.

**Current Principal Place of Business:**

21301 POWERLINE ROAD SUITE 312  
BOCA RATON, FL 33433

**New Principal Place of Business:**

925 SOUTH FEDERAL HWY  
SUITE 425  
BOCA RATON, FL 33432

**Current Mailing Address:**

PO BOX 11229 SUITE A  
KNOXVILLE, TN 37939

**New Mailing Address:**

PO BOX 11229  
KNOXVILLE, TN 37939

**FEI Number:** 02-0575040

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLALOCK LANDERS WALTERS & VOGLER PA  
802 11TH STREET WEST  
BRADENTON, FL 34205 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SCHWARTZ, THOMAS  
Address: 60 EAST 42ND ST  
City-St-Zip: NEW YORK, NY 10165

Title: S (X) Delete  
Name: SCHWARTZ, THOMAS  
Address: 60 EAST 42ND ST  
City-St-Zip: NEW YORK, NY 10165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PS (X) Change ( ) Addition  
Name: SCHWARTZ, THOMAS  
Address: 100 EAGLE ROCK AVENUE, SUITE 100  
City-St-Zip: EAST HANOVER, NJ 07936

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** THOMAS SCHWARTZ

P

03/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date