

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107106

FILED
Apr 30, 2006
Secretary of State

Entity Name: TOWNSEND RESTAURANT GROUP, INC.

Current Principal Place of Business:

327 SE PORT ST. LUCIE BLVD.
PORT SAINT LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

260 LOMA DRIVE NORTHWEST
WINTER HAVEN, FL 33881

New Mailing Address:

2218 HEATHWOOD CIRCLE
PORT ST.LUCIE, FL 34952

FEI Number: 59-3755129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOWNSEND, RAYMOND
260 LOMA DRIVE NORTHWEST
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

TOWNSEND, RAYMOND
2218 HEATHWOOD CIRCLE
PORT ST LUCIE, FL 34952 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: _____

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TOWNSEND, RAYMOND
Address: 260 LOMA DRIVE NORTHWEST
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: TOWNSEND, PATRICIA G
Address: 260 LOMA DRIVE NORTHWEST
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TOWNSEND, RAYMOND
Address: 2218 HEATHWOOD CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: D (X) Change () Addition
Name: TOWNSEND, PATRICIA G
Address: 2218 HEATHWOOD CIRCLE
City-St-Zip: PORT ST.LUCIE, FL 34952

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.

SIGNATURE: R. TOWNSEND

D

04/30/2006

Electronic Signature of Signing Officer or Director

Date