2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111141

Entity Name: TREASURE COAST MALL FOOTACTION, INC.

FILED Jan 09, 2004 Secretary of State

Current Principal Place of Business: 3174 NW FEDERAL HWY JENSEN BEACH, FL 34957			New Princi	New Principal Place of Business:	
Current Mailing Address:			New Mailin	New Mailing Address:	
PO BOX 141269 IRVING, TX 750141269					
FEI Number: (65-1156371	FEI Number Applied For ()	El Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS	${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$	
Title: Name: Address: City-St-Zip:	P ()[NEVILLE, SHAW 7880 BENT BRAI IRVING, TX 750	NCH DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SVP ()[APPLBAUM, LEE 7880 BENT BRAI DALLAS, TX 752	NCH DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X) I COLTER, WARR 7880 BENT BRAI DALLAS, TX 752	NCH DR	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP ()[WINTON, NANCY 7880 BENT BRAI CARROLLTON, 1	/ L NCH DR	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	AS ()[WILSON, MARY 7880 BENT BRAI DALLAS, TX 752	NCH DR	Title: Name: Address: City-St-Zip:	AS (X) Change () Addition WILSON, MARY B 3201 W. ROYAL LANE IRVING, TX 75063	
Title: Name: Address: City-St-Zip:	AS ()[GALANTE, ANDR 7880 BENT BRAI GRAPEVINE, TX	NCH DR	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MARY BETH WILSON VP 01/09/2004