2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 08, 2007 08:00 AM DOCUMENT # P0200003 1750 **Secretary of State** 1. Entity Name TCORP, INC. Principal Place of Business Mailing Address 2013 E. JEFFERSON ST 2013 E. JEFFERSON ST ORLANDO, FL 32803 ORLANDO, FL 32803 01032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 73-1632603 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE PREWETT, DANIEL L **5777 BENVEA RD S** SARASOTA, FL 34233 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE DRADICK, TIMOTHY E NAME STREET ADDRESS 2013 E. JEFFERSON ST CITY-ST-ZIP ORLANDO, FL 32803 TITLE NAME U00000578458 STREET ADDRESS 01/09/07-80030-007 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET AODRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other jike empowered.

SIGNATURE:

CiTY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF S OFFICER OR DIRECTOR