

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90164 001 ***300.00

DOCUMENT # P02000060612

1. Entity Name
TCW PROPERTY MANAGEMENT, INC.



Principal Place of Business
901 SOUTH FEDERAL HIGHWAY
SUITE 101
FORT LAUDERDALE, FL 33316

Mailing Address
901 SOUTH FEDERAL HIGHWAY
SUITE 101
FORT LAUDERDALE, FL 33316

66007887



03192008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-2367652

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

WILKES, JOHN P ESQ.
901 SOUTH FEDERAL HIGHWAY
SUITE 101
FORT LAUDERDALE, FL 33316

**DO NOT WRITE
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)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME JOYNER, WILLIAMS A.
STREET ADDRESS 901 SOUTH FEDERAL HIGHWAY STE 101
CITY-ST-ZIP FORT LAUDERDALE, FL 33316

TITLE S
NAME PANTLIN, PETER F
STREET ADDRESS 180 HAMPTON PLACE
CITY-ST-ZIP JUPITER, FL 33458

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 time empowered.

SIGNATURE: _____

Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Williams A. Joyner

Date: 4/11/08
Daytime Phone #: (954) 761-8330