

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069762

FILED
Jun 29, 2005
Secretary of State

Entity Name: TOWN & COUNTRY DEVELOPERS OF FLORIDA, INC.

Current Principal Place of Business:

2033 MAIN STREET
SUITE 600
SARASOTA, FL 34237

New Principal Place of Business:

2 NORTH TAMIAMI TRAIL
SUITE 410
SARASOTA, FL 34236

Current Mailing Address:

2033 MAIN STREET
SUITE 600
SARASOTA, FL 34237

New Mailing Address:

2 NORTH TAMIAMI TRAIL
SUITE 410
SARASOTA, FL 34236

FEI Number: 30-0094693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PFLUGNER, J. GEOFFREY
2033 MAIN STREET
SUITE 600
SARASOTA, FL 34237 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: BOVINO, JAMES J
Address: 300 TICE BOULEVARD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: P () Delete
Name: POCSI, CHARLES E
Address: 300 TICE BOULEVARD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: SVP () Delete
Name: FURST, WILLIAM
Address: 2 NORTH TAMIAMI TRAIL, SUITE 410
City-St-Zip: SARASOTA, FL 34236

Title: VP () Delete
Name: MARROCCO, HENRY
Address: 300 TICE BOULEVARD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: S () Delete
Name: REIDEL, KARL
Address: 300 TICE BOULEVARD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: AS () Delete
Name: APPEL, STEVE
Address: 2 NORTH TAMIAMI TRAIL, SUITE 410
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: WILLIAM FURST

SVP

06/29/2005

Electronic Signature of Signing Officer or Director

Date