

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000135637

Entity Name: TWS GROUP, INC.

FILED
Apr 14, 2004
Secretary of State

Current Principal Place of Business:

2922 LICHEN LANE
UNIT B
CLEARWATER, FL 33760 US

New Principal Place of Business:

5017 TORREY HILLS LANE
LUTZ, FL 33558 US

Current Mailing Address:

2922 LICHEN LANE
UNIT B
CLEARWATER, FL 33760 US

New Mailing Address:

5017 TORREY HILLS LANE
LUTZ, FL 33558 US

FEI Number: 55-0811855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDHOFF, TODD W
2922 LICHEN LANE
UNIT B
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

SANDHOFF, TODD W
5017 TORREY HILLS LANE
LUTZ, FL 33558 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: TODD W SANDHOFF

04/14/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SANDHOFF, TODD W
Address: 2922 LICHEN LANE, UNIT B
City-St-Zip: CLEARWATER, FL 33760 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANDHOFF, TODD W
Address: 5017 TORREY HILLS LANE
City-St-Zip: LUTZ, FL 33558 US

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: TODD W SANDHOFF

PRES

04/14/2004

Electronic Signature of Signing Officer or Director

Date