

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006720

FILED
Aug 25, 2004
Secretary of State

Entity Name: THE SHOPPES AT TYMBER CREEK, INC.

Current Principal Place of Business:

C/O JAFFE COMPANIES
300 N NOVA RD
ORMAOND BEACH, FL 32174

New Principal Place of Business:

C/O THE JAFFE COMPANIES
300 N NOVA RD
ORMOND BEACH, FL 32174

Current Mailing Address:

C/O JAFFE COMPANIES
300 N NOVA RD
ORMAOND BEACH, FL 32174

New Mailing Address:

C/O THE JAFFE COMPANIES
300 N NOVA RD
ORMOND BEACH, FL 32174

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JAFFE, RICHARD P
C/O JAFFE COMPANIES
300 N NOVA RD
ORMAOND BEACH, FL 32174

Name and Address of New Registered Agent:

JAFFE, RICHARD P
C/O THE JAFFE COMPANIES
300 N NOVA RD
ORMOND BEACH, FL 32174

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:

08/25/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JAFFE, RICHARD P
Address: 300 N NOVA RD
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD P. JAFFE

D

08/25/2004

Electronic Signature of Signing Officer or Director

Date