

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P03000042729

1. Entity Name  
TREASURE COAST AWARDS & TROPHIES, INC.



06 APR -4 PM 2:00

TALLAHASSEE, FLORIDA

Principal Place of Business  
3404 WESTVIEW AVE  
W PALM BCH, FL 33407

Mailing Address  
3404 WESTVIEW AVE  
W PALM BCH, FL 33407



04032006 Chg-P CR2E034 (11/05)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

16-1671188

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GREEN, ANGELA D  
3404 WESTVIEW AVE  
W PALM BCH, FL 33407

7. Name and Address of New Registered Agent

Name Bishop McCray  
Street Address 749 N. 5th Street  
City Riviera Beach FL 33407

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

Bishop McCray

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-04-06

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete  
NAME MCCRAY, BISHOP  
STREET ADDRESS 749 W. 5TH STREET  
CITY-ST-ZIP RIVIERA BEACH, FL 33407

TITLE P ☒ Delete  
NAME GREEN, ANGELA  
STREET ADDRESS 3404 WESTVIEW AVE.  
CITY-ST-ZIP WEST PALM BEACH, FL 33407

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition  
NAME Bishop McCray  
STREET ADDRESS 2910 Loch Lomond Drive  
CITY-ST-ZIP Conyers, GA 30094

TITLE Director of Operations ☐ Change ☐ Addition  
NAME Angela Green  
STREET ADDRESS 3404 Westview Ave  
CITY-ST-ZIP West Palm Beach FL 33407

TITLE Vice President ☐ Change ☒ Addition  
NAME Noel Campbell  
STREET ADDRESS 4900 Central Drive  
CITY-ST-ZIP Stone Mountain GA 30083

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 like empowered.

SIGNATURE:

Bishop McCray

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-4-06-853-6020