

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000076098

Entity Name: TOWN MARKETING, INC.

FILED  
Aug 26, 2004  
Secretary of State

## Current Principal Place of Business:

1954 SHOWER TREE WAY  
WELLINGTON, FL 33414

## New Principal Place of Business:

## Current Mailing Address:

1954 SHOWER TREE WAY  
WELLINGTON, FL 33414

## New Mailing Address:

FEI Number: 37-1474137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MUNIZ, TERESITA S  
1954 SHOWER TREE WAY  
WELLINGTON, FL 33414

## 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Change (X) Addition  
Name: MUNIZ, TERESITA S  
Address: 1954 SHOWER TREE WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: VPD ( ) Change (X) Addition  
Name: MUNIZ, EDUARDO M  
Address: 1954 SHOWER TREE WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: VPD ( ) Change (X) Addition  
Name: MUNIZ, VERONICA C  
Address: 1954 SHOWER TREE WAY  
City-St-Zip: WELLINGTON, FL 33414

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: TERESITA S MUNIZ

PD

08/26/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date