

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000006300

Entity Name: TRI-COUNTY RENOVATIONS INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

2148 FOREST HOLLOW WAY
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

2148 FOREST HOLLOW WAY
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 74-3113258 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MISNER, PAUL
2148 FOREST HOLLOW WAY
JACKSONVILLE, FL 32259 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MISNER, PAUL
Address: 2148 FOREST HOLLOW WAY
City-St-Zip: JACKSONVILLE, FL 32259

Title: V () Delete
Name: STEVENS, TOD W
Address: 1459 RIVER LANE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: V () Delete
Name: SENDTKO, CORY M
Address: 6022 WATEREDGE DR.
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change () Addition
Name: PATTERSON, MICHAEL T
Address: 3270 RICKY DR. #1903
City-St-Zip: JACKSONVILLE, FL 32210

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: PAUL MISNER

Electronic Signature of Signing Officer or Director

PRES

04/27/2005

Date