2007 FOR PROFIT CORPORATION

ANNUAL REPORT **FILED** Jan 08, 2007 08:00 AM DOCUMENT # P04000014326 **Secretary of State** TR-FL FINANCIAL SERVICES, INC. Principal Place of Business Mailing Address 435 DOCKSIDE DR 435 DOCKSIDE DR # 1002 # 1002 NAPLES, FL 34110 NAPLES, FL 34110 01042007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 80-0094210 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent OWENS, JAMES R SR DO NOT WRITE 435 DOCKSIDE DR # 1002 IN THIS SPACE NAPLES, FL 34110 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE PRES OWENS, JAMES R PRES NAME STREET ADDRESS 435 DOCKSIDE DR #1002 CITY-ST-ZIP NAPLES, FL 341103672 U000000577240 TITLE 01/08/07-80008-017 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. If 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.

Tames R. Owsens St.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR