

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165389

FILED  
Mar 20, 2008  
Secretary of State

**Entity Name:** TAG PROPERTY MAINTENANCE, INC.

**Current Principal Place of Business:**

1800 OLD MOODY BLVD  
BUNNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 352292  
PALM COAST, FL 32137

**New Mailing Address:**

**FEI Number:** 65-1240259

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

AUSTRINO, KATHLEEN R  
59 BAYSIDE DRIVE  
PALM COAST, FL 32137 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: AUSTRINO, KATHLEEN R  
Address: P.O. BOX 352292  
City-St-Zip: PALM COAST, FL 32137

Title: VP ( ) Delete  
Name: AUSTRINO, DOMINIC J  
Address: P.O. BOX 352292  
City-St-Zip: PALM COAST, FL 32135

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: CEO ( ) Change (X) Addition  
Name: FAY, RICHARD A  
Address: 59 BAYSIDE DRIVE  
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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:** KATHLEEN R. AUSTRINO

P

03/20/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date