

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172785

Entity Name: T.C.F. ENTERPRISES, INC

FILED
Sep 15, 2008
Secretary of State

Current Principal Place of Business:

329 BELL DRIVE
DEFUNIAK, FL 32433 US

New Principal Place of Business:

329 BELL DRIVE
DEFUNIAK SPRINGS, FL 32433 US

Current Mailing Address:

329 BELL DRIVE
DEFUNIAK SPRINGS, FL 32433 US

New Mailing Address:

FEI Number: 20-2064503 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THORN, BRANDI
329 BELL DRIVE
DEFUNIAK SPRINGS, FL 32433 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THORN, BILLY L
Address: 329 BELL DRIVE
City-St-Zip: DEFUNIAK SPGS, FL 32433 US

Title: SECY () Delete
Name: THORN, BRANDI
Address: 329 BELL DRIVE
City-St-Zip: DEFUNIAK SPGS, FL 32433 US

Title: D () Delete
Name: SIDOTY, DEAN
Address: 331 NE HOLLYWOOD BLVD
City-St-Zip: FT WALTON BCH, FL 32548 US

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: D (X) Change () Addition
Name: PETERS, JON
Address: 9276 MILITARY TRAIL
City-St-Zip: NAVARRE, FL 32566

Title: D () Change (X) Addition
Name: PAULSEN, DOUG
Address: 126 MAPLE AVE
City-St-Zip: FT. WALTON BEACH, FL 32548

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: BRANDI THORN

SECY

09/15/2008

Electronic Signature of Signing Officer or Director

Date