

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000041710

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: TOWERS INVESTMENT TRUST INC.

## Current Principal Place of Business:

819 S FEDERAL HWY STE 106  
STUART, FL 34994

## New Principal Place of Business:

1305 S. GLENBURNIE ROAD  
NEW BERN, NC 28562

## Current Mailing Address:

819 S FEDERAL HWY STE 106  
STUART, FL 34994

## New Mailing Address:

1305 S. GLENBURNIE ROAD  
NEW BERN, NC 28562

FEI Number: 65-1248151

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUMMERS, ROBERT P  
2400 SE FEDERAL HWY 4TH FLOOR  
STUART, FL 34994 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: BROTHERS, WILLIAM H  
Address: 819 S FEDERAL HWY STE 106  
City-St-Zip: STUART, FL 34994

Title: T (X) Delete  
Name: HESS, GARY S  
Address: 819 S FEDERAL HWY STE 106  
City-St-Zip: STUART, FL 34994

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BROTHERS, WILLIAM H  
Address: 303 AUGUSTA COURT  
City-St-Zip: NEW BERN, NC 28562

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

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: WILLIAM H. BROTHERS

P

02/02/2009

Electronic Signature of Signing Officer or Director

Date