2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000075985

Entity Name: TCF & SONS INC

City-St-Zip:

GREENHEAD, FL 32467 US

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 329 BELL DRIVE DEFUNIAK SPRINGS, FL 32433 US **Current Mailing Address: New Mailing Address:** 329 BELL DRIVE DEFUNIAK SPRINGS, FL 32433 US FEI Number: 20-4967162 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HICKMAN, JAMES A THORN, BRANDI 220 GOVERMENT STREET 329 BELL DRIVE DEFUNIAK SPRINGS, FL 32433 US SUITE 1 NICEVILLE, FL 32578 US 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: BRANDI THORN 05/01/2007 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition THORN, BRANDI Name: Name: 329 BELL DRIVE Address: Address: City-St-Zip: DEFUNIAK SPRINGS, FL 32433 US City-St-Zip: Title: DIR Title: () Delete () Change () Addition Name: BARNES, DANIEL Name: 482 DEER RUN EAST #2 Address: Address: DEFUNIAK SPRINGS, FL 32435 US City-St-Zip: City-St-Zip: Title: Title: DIR () Delete () Change () Addition FALLS, EUGENE Name: Name: 2724 CARTER CIRCLE Address: Address:

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.

City-St-Zip:

Ρ SIGNATURE: BRANDI THORN 05/01/2007