

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 08, 2008
Secretary of State**

DOCUMENT# P07000057942

Entity Name: TT OF I-4, INC.

Current Principal Place of Business:

8675 COMMODITY CIRCLE
ORLANDO, FL 32819 US

New Principal Place of Business:

4225 MILLENIA BLVD
ORLANDO, FL 32839 US

Current Mailing Address:

515 N. FLAGLER DRIVE
SUITE P-400
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 26-0179617 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, TERRY
515 N. FLAGLER DRIVE
SUITE P-400
WEST PALM BEACH, FL 33401 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TAYLOR, TERRY
Address: 515 N. FLAGLER DRIVE, SUITE P-400
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: S () Delete
Name: CERA, NANCY
Address: 515 N. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: AS () Delete
Name: PROIA, JEANNE
Address: 515 N. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: TRE (X) Delete
Name: THORNLEY, MICHAEL
Address: 515 N. FLAGLER DR., SUITE P-400
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: CERA, NANCY
Address: 515 N. FLAGLER DRIVE, SUITE P-400
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: AS (X) Change () Addition
Name: PROIA, JEANNE
Address: 515 N. FLAGLER DRIVE, SUITE P-400
City-St-Zip: WEST PALM BEACH, FL 33401 US

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: TERRY TAYLOR

PD

07/08/2008

Electronic Signature of Signing Officer or Director

_____ Date