

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000057380

FILED
Jan 12, 2005
Secretary of State

Entity Name: TOWER PROPERTIES OF FLORIDA, INC.

Current Principal Place of Business:

4190 NW 93 AVE
GAINESVILLE, FL 32653 US

New Principal Place of Business:

4150 NW 93 AVE
GAINESVILLE, FL 32653 US

Current Mailing Address:

4190 NW 93 AVE
GAINESVILLE, FL 32653 US

New Mailing Address:

4150 NW 93 AVE
GAINESVILLE, FL 32653 US

FEI Number: 59-3198440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUDD, HARVEY M
3111 NW 9TH AVE
GAINESVILLE, FL 32605 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: DP () Delete
Name: BUDD, HARVEY M
Address: 3111 NW 9TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: COOPER, BONNIE
Address: 2706 NW 23 TERRACE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARVEY M BUDD

PRES

01/12/2005

Electronic Signature of Signing Officer or Director

Date