MAY-23-2005 03:30PM FROM-THOMAS F PETWAY III +904 346

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 25, 2005 8:00 am
Secretary of State
04-29-2005 90235 017 ***150.00

DOCUMENT # P93000088122

1. Entity Name

TFP ENTERPRISES, INC.

Principal Place of Business	Mailing Address
5011 GATE PARKWAY STE 150 JACKSONVILLE FL 32256	5011 GATE PARKWAY STE 150 JACKSONVILLE FL 32256

1st MOORE CR2E034 (10/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3222341 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STEFFEY, FRED H
6620 SOUTHPOINT DRIVE SOUTH
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name: G. Alan Howard

Street Address (P.O. Box Number is Not Acceptable): 2900 50 North Laura Street Suite ~~2350~~

City: Jacksonville FL Zip Code: 32202

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: G. Alan Howard 5-23-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPST PETWAY, THOMAS F. III 5011 GATE PARKWAY STE 150 JACKSONVILLE FL 32256		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director, Chairman, Treasurer Thomas F. Petway, III ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PETWAY, THOMAS F IV 5011 GATE PKWY., STE 150 JACKSONVILLE FL 32256		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director, President, CEO Thomas F. Petway, IV 5011 Gate Parkway, Ste 150 ~~Jacksonville, Florida 32256~~ ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Monica Day 5011 Gate Parkway Ste 150 Jax FL 3225 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Chris Emans 5011 Gate Parkway Ste 150 Jax FL 3225 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas F. Petway III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #