


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90109 036 ***150.00

DOCUMENT # P94000079844 1. Entity Name T.C.W. OF PORT CHARLOTTE, INC.																													
Principal Place of Business 4820 TAMiami TRAIL PORT CHARLOTTE, FL 33980			Mailing Address 4820 TAMiami TRAIL PORT CHARLOTTE, FL 33980																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State			City & State																										
Zip Country			Zip Country																										
4. FEI Number 65-0530691				Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent NEEDHAM, PHUONG 4820 TAMiami TRAIL PORT CHARLOTTE, FL 33980			7. Name and Address of New Registered Agent Name <u>Tina Needham</u> Street Address (P.O. Box Number is Not Acceptable) <u>4820 Tamiami Trail</u> City <u>Port Charlotte</u> FL Zip Code <u>33980</u>																										
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">P</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>NEEDHAM, DUANE P</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2051 LAWSON AVE 22268 State ave</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>PORT CHARLOTTE, FL 33952</td> <td></td> </tr> </table> </div> <div style="width: 45%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">Needham, Duane P</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Needham, Duane P</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>22268 State ave</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Port Charlotte, FL 33952</td> <td></td> </tr> </table> </div> </div>						TITLE	P	<input type="checkbox"/> Delete	NAME	NEEDHAM, DUANE P		STREET ADDRESS	2051 LAWSON AVE 22268 State ave		CITY-ST-ZIP	PORT CHARLOTTE, FL 33952		TITLE	Needham, Duane P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Needham, Duane P		STREET ADDRESS	22268 State ave		CITY-ST-ZIP	Port Charlotte, FL 33952	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>Nease Needham</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>1-19-06</u> Daytime Phone # <u>941-625-9825</u>																									