## **2004 FOR PROFIT CORPORATION**

## **ANNUAL REPORT DOCUMENT # P95000014005** 1. Entity Name TSC FRANCHISE CORPORATION Principal Place of Business Mailing Address **4800 MANATEE AVENUE WEST 4900 MANATEE AVENUE WEST** SUITE 201 SUITE 201 BRADENTON, FL 34209 BRADENTON, FL 34209 CR2E034 (10/03) 01052004 DO NOT WRITE IN THIS SPACE 4. FE) Number 65-0559861 5. Certificate of Status Desired

**FILED** Jan 16, 2004 08:00 AM Secretary of State

Applied For

\$8.75 Additional

Fee Required

Not Applicable

6. Name and Address of Current Registered Agent					
BEYER, DAVID A 101 EAST KENNEDY BLVD. SUITE 2000 TAMPA, FL 33602			DO NOT WRITE IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the plans of registered agent.	ourpose of changing its register	ed office or registered agent.	, or both, in the State of Florida I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered			Agent signature required when reinstating)  DATE		
	E NOWIII FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	<ol> <li>Election Cempaign Finan Trust Fund Contribution.</li> </ol>	scing \$5.00 May Added to Fee	Be 3	
TIPLE NAME STREET ADDRESS CITY-ST-ZIF TIPLE NAME STREET ADDRESS CITY-ST-ZIF	OFFICERS AND DIRECT PSTD ETCHIESON, MIKE L 4900 MANATEE AVENUE WEST #20-BRADENTON, FL			U00000006745 01/16/04-80048-001 300.00	
THEE MAME SHREET ADDRESS CHY-ST-ZP THEE NAME SHREET ADDRESS CHY-ST-ZP				OO NOT WRITE N THIS SPACE	
TITLE WAME STREET ADORESS CITY-ST-ZIP				··· — · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby indicated	certify that the information supplied with this fi on this report or supplemental report is true a	ling does not qualify for the exe and accurate and that my signa	mption stated in Section 119 ture shall have the same legs	.07(3)(1), Florida Statutes. I further certify that the information at effect as if made under eath; that I am an officer or director	

changed, or on an attachment with an address, with all objective empowered.

SIGNATURE: .

SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR