

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000035935

Entity Name: TWOMTGS, INC.

FILED
Jan 17, 2009
Secretary of State

Current Principal Place of Business:

1338 S.W. SR 47
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

1338 S.W. SR 47
LAKE CITY, FL 32025

New Mailing Address:

FEI Number: 59-3304212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERS, ALVIN L
25 EAST 8TH STREET
PANAMA CITY, FL 32401 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: T () Delete
Name: SCOFIELD, ROYCE
Address: 2672 FEROL LANE
City-St-Zip: LYNN HAVEN, FL 32444

Title: P () Delete
Name: GRANTHAM, GREGORY
Address: 340 W 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

Title: VP () Delete
Name: TAJMAJER, WALTER
Address: 26757 CASH COURT
City-St-Zip: LEESBURG, FL 34748

Title: S () Delete
Name: MASSINGILL, SHARON
Address: 581 SW GRAPE ST
City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete
Name: MYERS, JOHN
Address: 496 SW IRIS COURT
City-St-Zip: LAKE CITY, FL 32024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: SHARON MASSINGILL

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01/17/2009

Electronic Signature of Signing Officer or Director

Date