## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000059269

Entity Name: TREASURE COAST PAYPHONE, INC.

FILED Mar 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3251 SW PORT ST LUCIE BLVD 66 SW BUTTONBUSH CT.
PORT SAINT LUCIE, FL 34953 PALM CITY, FL 34990 US

Current Mailing Address: New Mailing Address:

3251 SW PORT ST LUCIE BLVD 66 SW BUTTONBUSH CT. PORT SAINT LUCIE, FL 34953 PALM CITY, FL 34990 US

FEI Number: 65-0597502 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PIERCE, JOSEPH
3251 SW PORT ST LUCIE BLVD
PORT SAINT LUCIE, FL 34953 US
PIERCE, JOSEPH
66 SW BUTTONBUSH CT.
PALM CITY, FL 34990 US

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: JOSEPH E. PIERCE 03/19/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 PIERCE, VIRGINIA P
 Name:
 PIERCE, VIRGINIA P

 Address:
 3251 SW PORT ST LUCIE BLVD
 Address:
 66 SW BUTTONBUSH CT.

City-St-Zip: PORT SAINT LUCIE, FL 34953 US City-St-Zip: PALM CITY, FL 34990 US

Title: () Delete Title: (X) Change ( ) Addition Name: PIERCE, JOSEPH Name: PIERCE, JOSEPH E 3251 SW PORT ST LUCIE BLVD 66 SW BUTTONBUSH CT, Address: Address: PORT SAINT LUCIE, FL 34953 US PALM CITY, FL 34990 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH E. PIERCE ST 03/19/2006