

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000083275

Entity Name: TWO CC'S INC

FILED
Oct 24, 2006
Secretary of State

Current Principal Place of Business:

688 HWY 87 N
MILTON, FL 32571

New Principal Place of Business:

6880 HWY 87 N
MILTON, FL 32570

Current Mailing Address:

PO BOX 4640
MILTON, FL 32570

New Mailing Address:

5060 POTOMAC DR.
PACE, FL 32571

FEI Number: 71-0928297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GABBARD, DONNIE
5576 CHIPPER LN
MILTON, FL 32571 US

Name and Address of New Registered Agent:

LARGE, GARRY S
5060 POTOMAC DR.
PACE, FL 32571 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: GARRY S. LARGE

10/24/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: GABBARD, DONNIE
Address: 5576 CHIPPER LANE
City-St-Zip: MILTON, FL 32571

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LARGE, TERI J
Address: 5060 POTOMAC DR.
City-St-Zip: PACE, FL 32571

Title: VP () Change (X) Addition
Name: LARGE, GARRY S
Address: 5060 POTOMAC DR
City-St-Zip: PACE, FL 32571

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: TERI J. LARGE

P

10/24/2006

Electronic Signature of Signing Officer or Director

Date