## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

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SIGNATURE: X

## Mar 30, 2004 8:00 am **Secretary of State** DOCUMENT # P96000067614 03-30-2004 90008 006 \*\*\*150.00 1. Entity Name TARCORRA PROPERTIES, INC. Principal Place of Business Mailing Address 3003 SOUTH ATLANTIC AVE., 16A 1 3003 SOUTH ATLANTIC AVE., 16A 1 DAYTONA BEACH, FL 32118 DAYTONA BEACH, FL 32118 03222004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3402452 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORR, KEVIN J DO NOT WRITE 3003 SOUTH ATLANTIC AVE., 16A 1 DAYTONA BEACH, FL 32118 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS **PVST** TITLE NAME CORR, KEVIN J 3003 SOUTH ATLANTIC AVE., 16A 1 STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32118 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 under 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 a block 10 or Block 11 if the empowered.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

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