

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 10, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P96000067946**

1. Entity Name  
TJW REFERRALS, INC.



Principal Place of Business  
1555 ST LUCIE WEST, BLVD  
SUITE 103  
PORT ST. LUCIE, FL 34986 US

Mailing Address  
1555 ST LUCIE WEST, BLVD  
SUITE 103  
PORT ST. LUCIE, FL 34986 US



03022007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0693631	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

HOUGH, GEORGE B JR  
C/O KEANE MURPHY & HOUGH  
900 EAST OCEAN BLVD STE 244  
STUART, FL 34994

**DO NOT WRITE  
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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	WHITE, THOMAS J
STREET ADDRESS	23 HUNTLEIGH WOODS DR
CITY-ST-ZIP	SAINT LOUIS, MO 63131

TITLE	D
NAME	COLE, DOROTHY R
STREET ADDRESS	1619 SW DEFALU
CITY-ST-ZIP	PORT SAINT LUCIE, FL 34953

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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04/18/07-80058-002 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dorothy R. Cole DOROTHY R. COLE

4/13/07 772.340.4000

Date Daytime Phone #