

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 13 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000073924 (8)

1. Corporation Name  
TWOCO, INC.

Principal Place of Business  
24600 TAMiami TRAIL  
SUITE 200  
BONITA SPRINGS FL 33923  
US

Mailing Address  
25 BLUEBILL AVENUE A-1006  
NAPLES FL 34108



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26 24600 S. TAMiami TR		09/05/1996	
22 Suite, Apt. #, etc.		27 200		4. FEI Number	
23 City & State		28 Bon. In Springs FL		59-3408028	
24 Zip		29 34134		Applied For	
25 Country		30 USA		Not Applicable	
				6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

COREY, GEORGE A  
25 BLUEBILL AVENUE A-1006  
NAPLES FL 34108

10. Name and Address of New Registered Agent

81 Name GEORGE A. COREY  
82 Street Address (P.O. Box Number is Not Acceptable) 3678 OLD COTTAGE LN.  
83  
84 City BONITA SPRINGS FL 85 Zip Code 34134

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE George A. Corey DATE 3-7-98  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COREY, GEORGE A	1.2 NAME	
STREET ADDRESS	25 BLUEBILL AVENUE A-1006	1.3 STREET ADDRESS	3678 OLD COTTAGE LN.
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	BONITA SPRINGS FL 34134
TITLE	VSD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COREY, JUDITH L	2.2 NAME	
STREET ADDRESS	25 BLUEBILL AVENUE A-1006	2.3 STREET ADDRESS	3678 OLD COTTAGE LN.
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP	BONITA SPRINGS FL 34134
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: [Signature] DATE: 3-7-98 941-948-1399

CR2E034 (10/97)