

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004694

FILED
Mar 08, 2005
Secretary of State

Entity Name: TAX CREDIT CONSULTANTS, INC.

Current Principal Place of Business:

3383 DOVECOTE MEADOW LANE
DAVIE, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

3383 DOVECOTE MEADOW LANE
DAVIE, FL 33328 US

New Mailing Address:

FEI Number: 65-0987637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BILLANTE, THOMAS N
3383 DOVECOTE MEADOW LANE
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BILLANTE, TOM
Address: 1478 BLUE JAY CIRCLE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BILLANTE, THOMAS
Address: 3383 DOVECOTE MEADOW LANE
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS BILLANTE

MR

03/08/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date