


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90061 017 ***150.00

DOCUMENT # P98000007779 1. Entity Name TOWN & COUNTRY HOME BUILDERS, INC.					
Principal Place of Business 1922 SOUTHWEST BALTIMORE STREET PORT SAINT LUCIE, FL 34984			Mailing Address 1922 SOUTHWEST BALTIMORE STREET PORT SAINT LUCIE, FL 34984		
2. Principal Place of Business 1922 SE BILTMORE ST		3. Mailing Address 1922 SE BILTMORE ST			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State PORT ST. LUCIE, FL		City & State PORT ST. LUCIE, FL		4. FEI Number 65-0807791	
Zip 34984		Country ST LUCIE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 34984		Country ST LUCIE		Applied For Not Applicable	
6. Name and Address of Current Registered Agent MCARTHY, TERENCE P 2400 SE FEDERAL HIGHWAY STUART, FL 34996				7. Name and Address of New Registered Agent Name DEAN MEAD SERVICES, LLC Street Address (P.O. Box Number is Not Acceptable) 800 N. MAGNOLIA AVE, SUITE 1500 City ORLANDO FL Zip Code 32803	
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. DEAN MEAD SERVICES, LLC By: <u>Steven C. Lee</u> Steven C. Lee, VP 2/15/06 SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCQUILLAN, WILLIAM H 3322 SOUTHEAST RIVER VISTA DRIVE PORT SAINT LUCIE, FL 34952 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRIANS, LARRY 1995 SE GIFFEN ROAD PORT SAINT LUCIE, FL 34952 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>Steven C. Lee</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1/31/06 7723442161 <small>Date Daytime Phone #</small>		



ATTACHMENT

60017334

Dean, Mead, Egerton, Bloodworth, Capouano & Bozarth, P.A.

800 North Magnolia Avenue, Suite 1500
P.O. Box 2346 (ZIP 32802-2346)
Orlando, Florida 32803

407-841-1200
407-423-1831 Fax
www.deanmead.com

Orlando
Fort Pierce
Viera

MARY F. FENDLE
407-428-5119
mfendle@deanmead.com

February 15, 2006

Florida Department of State
Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

Re: 2006 For Profit Corporation Annual Report for Town & County Home
Builders, Inc., Florida Document #P98000007779

Gentlemen:

Enclosed for filing is the 2006 For Profit Corporation Annual Report for Town
& County Home Builders, Inc., together with the corporation's check in the amount of \$150.00
for the filing fee.

If you have a question about the Annual Report, please contact the undersigned.

Sincerely,

Mary F. Fendle, Paralegal

:mf

Enclosures

cc: William H. McQuillan w/enclosures
Dennis G. Corrick, Esq. w/enclosures

00260302v1