

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000007779

FILED
Feb 23, 2007
Secretary of State

Entity Name: TOWN & COUNTRY HOME BUILDERS, INC.

Current Principal Place of Business:

1922 SOUTHEAST BALTIMORE STREET
PORT SAINT LUCIE, FL 34984

New Principal Place of Business:

1922 S. W. BILTMORE STREET
PORT SAINT LUCIE, FL 34984

Current Mailing Address:

1922 SOUTHEAST BALTIMORE STREET
PORT SAINT LUCIE, FL 34984

New Mailing Address:

1922 S. W. BILTMORE STREET
PORT SAINT LUCIE, FL 34984

FEI Number: 65-0807791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES, LLC
800 N. MAGNOLIA AVE., STE. 1500
ORLANDO, FL 32803 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: P () Delete
Name: MCQUILLAN, WILLIAM H
Address: 3322 SOUTHEAST RIVER VISTA DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VP () Delete
Name: BRIANS, LARRY
Address: 1995 SE GIFFEN ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BRIANS, LARRY
Address: 537 S. W. NAUTICAL AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34984

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: WILLIAM H MCQUILLAN

P

02/23/2007

Electronic Signature of Signing Officer or Director

Date