

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065610

Entity Name: TOTAL LOSS CONTROL, INC.

FILED
Mar 22, 2005
Secretary of State

Current Principal Place of Business:

P. O. BOX 3874
HOLIDAY, FL 34690

New Principal Place of Business:

5740 BITTERSWEET DRIVE
HOLIDAY, FL 34690

Current Mailing Address:

P. O. BOX 3874
HOLIDAY, FL 34690

New Mailing Address:

5740 BITTERSWEET DRIVE
HOLIDAY, FL 34690

FEI Number: 59-3587005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRIS, DAVID
5740 BITTERSWEET DR
HOLIDAY, FL 34690 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: PS () Delete
Name: FARRIS, DAVID
Address: 5740 BITTERSWEET DR
City-St-Zip: HOLIDAY, FL 34690

Title: VT () Delete
Name: ANTHONY, DONNA
Address: 5740 BITTERSWEET DR
City-St-Zip: HOLIDAY, FL 34690

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VT (X) Change () Addition
Name: FARRIS, DONNA
Address: 5740 BITTERSWEET DR
City-St-Zip: HOLIDAY, FL 34690

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: DAVID FARRIS

PS

03/22/2005

Electronic Signature of Signing Officer or Director

Date