

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000066486

FILED
Apr 19, 2004
Secretary of State

Entity Name: TREE CORPORATION OF AMERICA, INC.

Current Principal Place of Business:

3829 RODEO RD.
BELL, FL 32619

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9
BELL, FL 32619

New Mailing Address:

FEI Number: 59-3591619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLUCKMAN, MARK
1479 NW 40TH AVENUE
BELL, FL 32619 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: DPC () Delete
Name: GLUCKMAN, MARK
Address: 1479 NW 40TH AVE PO BOX 610
City-St-Zip: BELL, FL 32619

Title: DVT () Delete
Name: MASIO, MARC
Address: 10921 NW 31ST PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: DV () Delete
Name: MASIO, REBECCA
Address: 10921 NW 31ST PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: DVS () Delete
Name: GLUCKMAN, LEE
Address: 1479 NW 40TH AVE PO BOX 610
City-St-Zip: BELL, FL 32619

Title: D (X) Delete
Name: MASIO, JANET
Address: 59 HAZEL ST
City-St-Zip: DUMONT, NJ 07628

Title: D () Delete
Name: SIDNEY, GLUCKMAN
Address: 13767 AMHERST WAY
City-St-Zip: LAKEWOOD, CO 80228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: MARK A. GLUCKMAN

PRES

04/19/2004

Electronic Signature of Signing Officer or Director

Date