

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S10556

FILED
Apr 26, 2004
Secretary of State

Entity Name: TACOLCY PROPERTY MANAGEMENT CORPORATION

Current Principal Place of Business:

645 NW 62ND STREET
SUITE 300
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

645 NW 62ND STREET
SUITE 300
MIAMI, FL 33150

New Mailing Address:

FEI Number: 65-0248449 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARDNER, CAROL
645 NW 62ND STREET
SUITE 300
MIAMI, FL 33150 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: C () Delete
Name: RODGERS, THEO
Address: 306 METRO PLAZA
City-St-Zip: BALTIMORE, MD

Title: D () Delete
Name: FLORENCE, MOSES
Address: 645 NW 62ND STREET, SUITE 300
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: KELLY, ANGELA R
Address: 645 NW 62ND ST, STE. 300
City-St-Zip: MIAMI, FL 33150

Title: P () Delete
Name: GARDNER, CAROL
Address: 645 NW 62ND ST, STE. 300
City-St-Zip: MIAMI, FL 33150

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:

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: CAROL GARDNER

P

04/26/2004

Electronic Signature of Signing Officer or Director

_____ Date