

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L98899

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** TIMBERLINE BUILDERS, INC.

**Current Principal Place of Business:**

3618 DEL PRADO BLVD S  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

3618 DEL PRADO BLVD S  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 65-0220534      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOMER, BRIAN D  
3618 DEL PRADO BLVD S  
CAPE CORAL, FL 33904 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

**OFFICERS AND DIRECTORS:**

**Title:** DPT  
**Name:** DIGGS, GEORGE C., III  
**Address:** 2830 SW 39TH STREET  
**City-St-Zip:** CAPE CORAL, FL 33914 US

**Title:** DVS  
**Name:** GOMER, BRIAN D.  
**Address:** 3340 SE 22ND AVENUE  
**City-St-Zip:** CAPE CORAL, FL 33904 US

I hereby 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 all other like empowered.

SIGNATURE: BRIAN D GOMER

VP

04/26/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date