

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000012862

FILED
Apr 28, 2007
Secretary of State

Entity Name: TIMBUK TOO PROPERTY CORPORATION

Current Principal Place of Business:

700 N. OSCEOLA AVE
704
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

700 N. OSCEOLA AVE
704
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 33-1072592 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGALLS, CHESTER
3495 5 AVE NORTH
ST PETERSBURG, FL 33713 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: DP () Delete
Name: PEENS, LOUIS
Address: 300 N OSCEOLA AVE APT 6B
City-St-Zip: CLEARWATER, FL 33755

Title: DV () Delete
Name: PEENS, HOLGER
Address: 300 N OSCEOLA AVE APT 6B
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: PEENS, HEIDE
Address: 300 N OSCEOLA AVE APT 6B
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PEENS, LOUIS
Address: 700 N OSCEOLA AVE #704
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Change () Addition
Name: PEENS, HOLGER
Address: 700 N OSCEOLA AVE #704
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Change () Addition
Name: PEENS, HEIDE
Address: 700 N OSCEOLA AVE #704
City-St-Zip: CLEARWATER, FL 33755

I hereby certify that the information supplied with this filing does not qualify 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: LOUIS PEENS

DP

04/28/2007

Electronic Signature of Signing Officer or Director

_____ Date