## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000055063 (0)

| TIMOTHY SPRINKLE & ASSOCIATE | FS. | INC. |
|------------------------------|-----|------|
|------------------------------|-----|------|

Principal Place of Business Mailing Address

PO BOX 291071 PORT ORANGE FL 32129
US

Mailing Address
PO BOX 291071
PORT ORANGE FL 32129
US



| 1   |   | US                             |   |  |  |                                |                                 |                                     |
|---|---|--------------------------------|---|--|--|--------------------------------|---------------------------------|-------------------------------------|
|   |   |                                |   |  | 3. Date Incorporated or Qualif-  | od <b>3a</b> , C               | Date of Last F                  | •                                   |
| 2. Principal Pt   | ace of Business   | 2a, Mailing Address            |   |  | 08/05/1993   | l                              | 04/28/19                        |                                     |
| 21  | add o Endonicas   | 28. Maining Address            |   |  | 4. FEI Number  |                                |                                 | Applied For                         |
| Suite. Apt.   | #, etc  | Suite, Apt #, etc.             |   |  | 65-0428092   |                                | -··                             | Not Applicable                      |
| 22  | · · · · · · · · · · · · · · · · · · ·   | 27                             |   |  | 5. Certificate of Status Desired   |                                |                                 | Additional<br>Required              |
|   |   | 28                             | la: , ,   |  | <ol><li>Election Campaign Financing<br/>Trust Fund Contribution</li></ol>    |                                | <b>\$5.0</b><br>Adde            | 00 May Be<br>ed to Fees             |
| Zip<br><b>24</b>  | Country 25  | Ζφ<br><b>29</b>                | Country<br>30   | <i>Y</i>   | 8. This corporation has liability in Florida Statutes                        | for intangible<br>Yes \[ \] No | e tax under <b>s</b>            |                                     |
|   | 9. Name and Address of Curren   | t Registered Agent             |   |  | 10. Name and Address of Nev  |                                |                                 |                                     |
|   |   |                                | 81  | Name   |  |                                |                                 |                                     |
| SPRINKI<br>4710 DIX   | LE, TIMOTHY G<br>XIF OR   |                                | 82  | Street Add   | dress (P.O. Box Number is Not Accep  | lable)                         |                                 |                                     |
|   | INLET FL 32127  |                                | 83  | <del> </del>   |  |                                |                                 |                                     |
|   |   |                                | 84  | City   |  |                                | . 85 Ži                         | p Code                              |
|   | o the provisions of Sections 607.0502<br>od agent, or both, in the State of Floric<br>h, and accept the obligations of, Secti |                                |   | named corpo<br>oration's boa   | ration submits this statement for the and of directors. Thereby accept the a | purpose of o                   | changing its i<br>as registered | egistered office<br>agent. I am     |
| SIGNATURE .   | Signature: typed or printed name of registered againt a   | ared title & grade size        | NO F Registered Age   |  |  |                                |                                 |                                     |
|   |   |                                |   |  | od when it ristating:  | DATE                           |                                 |                                     |
| 12.   | · · · · · · · · · · · · · · · · · · ·   |                                |   |  |  |                                | ND DIDEOLO                      | 00 111.46                           |
|   | OFFICERS AND  |                                | 13.   |  | ADDITIONS/CHANGES TO O   |                                | ·-··                            | RS IN 12                            |
| 12.   | OFFICERS AND  | DIRECTORS                      | 13.<br>1 1 THEF   |  |  |                                | ND DIRECTO                      | RS IN 12 Addition                   |
| <b>12.</b>  | · · · · · · · · · · · · · · · · · · ·   | DIRECTORS                      | 13.<br>1 1 THEF<br>12 NAME  |  |  |                                | ·-··                            | RS IN 12                            |
| 12.<br>TITLE<br>NAME<br>STREET ADDRESS  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DIRECTORS                      | 13.<br>1 1 THEF<br>12 NAME<br>1.3 STHEE   | ADDRESS  |  |                                | ·-··                            | RS IN 12 Addition                   |
| 12.<br>TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-7IP   | OFFICERS AND<br>P<br>SPRINKLE, TIMOTHY  | DIRECTORS                      | 13.<br>1 1 THEF<br>12 NAME<br>1.3 STHEET<br>1 4 CHY-S   | ADDRESS  |  |                                | ☐ Change                        | Addition                            |
| 12. TITLE NAME STREET ANDRESS CHY-ST-7IP TITLE  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DIRECTORS DELETE               | 13.<br>1 1 THEF<br>12 NAME<br>1.3 STHEE   | ADDRESS  |  |                                | ·-··                            | RS IN 12 Addition Addition          |
| 12.<br>TIFLE<br>NAME<br>STREET ADDRESS<br>CHY-ST-7IP  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DIRECTORS DELETE               | 13. 1 1 THE 12 NAME 13 STHEEL 14 CITY-5 2 1 TIRE 22 NAME  | ADDRESS<br>it zip  |  |                                | ☐ Change                        | RS IN 12 Addition Addition          |
| 12.  TITLE  NAME  STREEL ADDRESS  CITY-ST-7IP  TITLE  NAME  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DIRECTORS DELETE               | 13. 1 1 THEF 12 NAME 1.3 STHEEL 1.4 CHY-5 2 1 THRE 22 NAME 23 STHEEL  | ADDRESS<br>SEZIP   |  |                                | ☐ Change                        | RS IN 12 Addition Addition          |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-ST-7IP  TITLE  NAME  STREET ADDRESS  CITY-ST-7IP   | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DIRECTORS DELETE               | 13. 1 1 THE 12 NAME 13 STHEEL 14 CITY-5 2 1 TIRE 22 NAME  | ADDRESS<br>SEZIP   |  |                                | ☐ Change                        | 7,000,01                            |
| 12. TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS   | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE                         | 13. 1 1 THE 12 NAME 1.3 STHEEL 1.4 CHY-5 2 1 TIRE 22 NAME 23 STHEEL 24 CHY-5  | ADDRESS<br>SEZIP   |  |                                | ☐ Change                        | RS IN 12 Addition Addition Addition |
| 12.  TIPLE  NAME  STRELL ADDRESS  CHY-ST-7IP  TIPLE  NAME  STREST ADDRESS  CITY-ST-7IP  TIPLE  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE                         | 13. 1 1 THEF 12 NAME 1.3 STHEEL 1.4 CITY-S 2 1 THEE 22 NAME 23 STHEEL 24 CITY-S 3 1 THEE  | ADDRESS IF ZIP ADDRESS 1- ZIP  |  |                                | ☐ Change                        | 7,000,01                            |
| 12.  TITLE  NAME  STREEL ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREEL ADDRESS   | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE                         | 13. 1 1 THEF 12 NAME 1.3 STHEEL 1.4 CHY-S 2 1 THEE 22 NAME 23 STHEEL 24 CHY-S 3 1 THEE 32 NAME  | ADDRESS IF ZIP  ADDRESS I - ZIP  |  |                                | ☐ Change                        | 7,000,01                            |
| 12.  TITLE  NAME  STREEL ADDRESS  CHY, ST-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-ST-ZIP  TITLE  CITY-ST-ZIP  TITLE  CITY-ST-ZIP  TITLE  CITY-ST-ZIP  TITLE  CITY-ST-ZIP  TITLE  CITY-ST-ZIP   | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE                         | 13. 1 1 THEF 12 NAME 1.3 STHEEL 1.4 CHY-S 2 1 THEE 22 NAME 23 STHEEL 24 CHY-S 3 1 THEE 32 NAME 33 STHEEL  | ADDRESS IF ZIP  ADDRESS I - ZIP  |  |                                | ☐ Change                        | 7,000,01                            |
| 12.  TITLE  NAME  STREEL ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-ST-ZIP  TITLE   | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE         | 13. 1 1 THEF 12 NAME 1.3 STHEEL 1.4 CHY-S 2 1 THEE 22 NAME 23 STHEEL 24 CHY-S 3 1 THEE 32 NAME 33 STHEEL 34 CHY-S 34 CHY-S  | ADDRESS IF ZIP  ADDRESS I - ZIP  |  |                                | Change Change                   | Addition                            |
| 12.  IITLE  NAME  STREEL ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-S1-ZP  TITLE  NAME  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE         | 13. 1 1 THEF 12 NAME 1.3 STHEEL 1.4 CHY-S 2 1 THEE 22 NAME 23 STHEEL 24 CHY-S 3 1 THEE 32 NAME 33 STHEEL 34 CHY-S 4 1 THEE  | ADDRESS IF ZIP  ADDRESS 1- ZIP  ADDRESS 1- ZIP                                     |  |                                | Change Change                   | Addition                            |
| 12.  TITLE  NAME  STREEL ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-ST-ZIP  THEE  NAME  STREEL ADDRESS  CITY-ST-ZIP  THEE  NAME  STREEL ADDRESS  CITY-ST-ZIP  THEE  NAME  STREEL ADDRESS  CITY-ST-ZIP   | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE         | 13. 1 1 THEF 12 NAME 1.3 STHEE 1.4 CHY-S 2 1 TIRE 22 NAME 2.9 STHEE 2.4 CHY-S 3 1 TIRE 32 NAME 33 STHEE 34 CHY-S 4 1 TIRE 42 NAME   | ADDRESS IF ZIP  ADDRESS IT ZIP  ADDRESS IT ZIP  ADDRESS ADDRESS                    |  |                                | Change Change                   | Addition                            |
| 12.  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE         | 13. 1 1 THEF 12 NAME 13 STHEEL 14 CHY-S 2 1 THRE 22 NAME 23 STHEEL 32 NAME 33 STHEEL 34 CHY-S 4 1 THEE 42 NAME 43 STREEL  | ADDRESS IF ZIP  ADDRESS IT ZIP  ADDRESS IT ZIP  ADDRESS ADDRESS                    |  |                                | Change Change                   | Addition                            |
| 12.  INTE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE  DELETE | 13. 1 1 THEF 12 NAME 1.3 STHEEL 1.4 CHY-S 2 1 TIREE 22 NAME 2.3 STHEEL 2.4 CHY-S 3 1 TIREE 32 NAME 3.3 STHEEL 3.4 CHY-S 4.1 TIREE 4.2 NAME 4.3 STREEL 4.4 CHY-S                                     | ADDRESS IF ZIP  ADDRESS IT ZIP  ADDRESS IT ZIP  ADDRESS ADDRESS                    |  |                                | Change Change Change            | Addition Addition                   |
| 12.  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE   | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE  DELETE | 13. 1 1 THEF 12 NAME 13 STHEEL 14 CHY-S 2 1 THEE 22 NAME 23 STHEEL 32 NAME 33 STHEEL 34 CHY-S 4 1 THEE 42 NAME 43 STHEEL 44 CHY-S 5 1 THEF 5 1 THEF 5 1 THEF  | ADDRESS IF ZIP  ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS 1- ZIP                     |  |                                | Change Change Change            | Addition Addition                   |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE  DELETE | 13. 1 1 THEF 12 NAME 13 STHEEL 14 CHY-S 2 1 THRE 22 NAME 23 STHEEL 24 CHY-S 3 1 THEE 32 NAME 33 STHEEL 34 CHY-S 4 THREE 42 NAME 43 STHEEL 44 CHY-S 5 THREE 52 NAME                                  | ADDRESS IF ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP         |  |                                | Change Change Change            | Addition Addition                   |
| 12.  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  AAM:  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE  DELETE | 13. 1 1 THEF 12 NAME 1.3 STHEFT 14 CITY-S 2 1 TIRE 22 NAME 23 STHEET 24 CITY-S 3 1 THE 32 NAME 33 STHEET 42 NAME 43 STREET 44 CITY-S 5 THILE 52 NAME 53 STREET                                      | ADDRESS IF ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP         |  |                                | Change Change Change Change     | Addition  Addition                  |
| T12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAMI  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAMI  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAMI  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE  DELETE | 13. 1 1 THEF 12 NAME 13 STHEEL 14 CHY-S 2 1 THRE 22 NAME 23 STHEEL 24 CHY-S 3 1 THEE 32 NAME 33 STHEEL 44 CHY-S 4 1 THEE 42 NAME 43 STHEEL 44 CHY-S 5 1 THEF 52 NAME 53 STHEEL 54 CHY-S             | ADDRESS IF ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP         |  |                                | Change Change Change            | Addition Addition                   |
| 12. TIPLE NAME STRELL ADDRESS CHY-ST-ZIP TIPLE NAME STRELL ADDRESS CHY-S1-ZIP TIPLE NAMI STREEL ADDRESS CHY-S1-ZIP TIPLE AAM; STREEL ADDRESS CHY-S1-ZIP TIPLE AAM; STREEL ADDRESS CHY-S1-ZIP TIPLE  | OFFICERS AND P SPRINKLE, TIMOTHY 4710 DIXIE DRIVE   | DELETE  DELETE  DELETE  DELETE | 13. 1 1 THEF 12 NAME 13 STHEEL 14 CITY-S 2 1 THRE 22 NAME 23 STHEEL 24 CITY-S 3 1 THRE 32 NAME 33 STHEEL 42 NAME 43 STHEEL 44 CITY-S 5 1 THRE 52 NAME 53 STHEEL 54 CITY-S 6 THREE 54 CITY-S 6 THREE | ADDRESS IF ZIP  ADDRESS I - ZIP  ADDRESS I - ZIP  ADDRESS I - ZIP  ADDRESS I - ZIP |  |                                | Change Change Change Change     | Addition  Addition                  |

certify trial the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early, that I am an officer or director of the corporation or the receiver or trusted en powered to execute this report as required by Chapter 607. Florida Statutes: for the made under appears in Block 12 or Block 18 if or property to an attachment with an address.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A8/96

761-4621