## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # F05000001358**

1. Entity Name
TIM WIRGAU BUILDER, INC.



FILED Jan 14, 2008 8:00 am Secretary of State

01-14-2008 90091 030 \*\*\*150.00

Principal Place of Business

1776 W. HEYTHALER HWY ROGERS CITY, MI 49779 Maifing Address

1776 W. HEYTHALER HWY ROGERS CITY, MI 49779 40002845



DO NOT WRITE IN THIS SPACE

01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 38-2952685

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WIRGAU, TIMOTHY N 1999 KINGS HWY, #134A PORT CHARLOTTE, FL 33980

## DO NOT WRITE IN THIS SPACE

|                 |  |  |                |                                | ·  |
|-----------------|--|--|----------------|--------------------------------|--|
|                 | named entity submits this statement for the poons of registered agent. | ourpose of changing its registere                    | d office or r  | egistered agent, or bo         | oth, in the State of Florida. I am familiar with, and accept |
| SIGNATURE_      | Signature, typed or printed name of registered agent and title         | d applicable. (NOTE: Registered                      | Agent signatur | e required when reinstating)   | DATE   |
| FiL<br>After Ma | E NOW!!! FEE IS \$150.00<br>ay 1, 2008 Fee will be \$550.00            | Election Campaign Finan     Trust Fund Contribution. | cing           | \$5.00 May Be<br>Added to Fees |  |
| 10.             | OFFICERS AND DIREC   | CTORS  | I              |                                | 1  |
| TITLE           | P  |  |                |                                |  |
| NAME            | WIRGAU, TIMOTHY N  |  |                |                                |  |
| STREET ADDRESS  | 1776 W. HEYTHALER HWY  |  |                |                                |  |
| CATY-ST-ZIP     | ROGERS CITY, MI 49779  |  |                |                                |  |
| TITLE -         | VP SECRETARY-TREASURI  | ER   |                |                                |  |
| NAME            | WIRGAU, MARSHA Ĺ   |  |                |                                | •  |
| STREET ADDRESS  | 1776 W. HEYTHALER HWY  |  |                |                                |  |
| CITY-ST-ZIP     | ROGERS CITY, MI 49779  |  |                |                                |  |
| TITLE           |  |  |                |                                |  |
| NAME            |  |  |                |                                |  |
| STREET ADDRESS  |  |  |                | DΩ                             | NOT WRITE  |
| CITY-ST-ZIP     |  |  |                | DO                             | MOI WINIL  |
| TITLE           |  |  |                | IN '                           | THIS SPACE   |
| NAME            |  |  |                | 11.4                           | TING OF AGE  |
| STREET ADDRESS  |  |  |                |                                |  |
| CITY-ST-ZIP     |  |  | :              |                                |  |
| TITLE           |  |  |                |                                |  |
| NAME            |  |  |                |                                |  |
| STREET ADDRESS  |  |  |                |                                |  |
| CITY-ST-ZIP     |  |  |                |                                | • • •  |
| TITLE 'c.       |  |  | ,              |                                |  |
| NAME            |  |  |                |                                |  |
| STREET ADDRESS  |  |  |                |                                |  |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with agraddress, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HUMBE OF SIGNING OFFICER OR DIRECTOR

1-8-08

989-734-2911

Daytime Phone #