

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000042730

**Entity Name:** TIM ROE CREATIVE CRAFTSMAN, INC.

**Current Principal Place of Business:**

1829 JASPER DR.  
ORLANDO, FL 32807

**Current Mailing Address:**

1829 JASPER DR.  
ORLANDO, FL 32807

**FEI Number:** 51-0464190

**Certificate of Status Desired:** No

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

ROE, AUDREY  
1829 JASPER DR.  
ORLANDO, FL 32807 US

*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

**Officer/Director Detail :**

Title D  
Name ROE, TIM  
Address 1829 JASPER DR.  
City-State-Zip: ORLANDO FL 32807

Title D  
Name ROE, AUDREY  
Address 1829 JASPER DR.  
City-State-Zip: ORLANDO FL 32807

Title D  
Name ROE, BRENDEN  
Address 1829 JASPER DR  
City-State-Zip: ORLANDO FL 32807

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:** TIMOTHY W. ROE

**PRESIDENT**

**02/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date