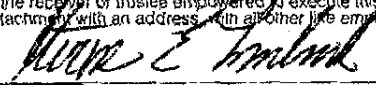


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 08:00 AM
Secretary of State

DOCUMENT # 210675		
1. Entity Name TOMBRINK ENTERPRISES, INC.		
Principal Place of Business 2905 SUTTON PINES CT PLANT CITY, FL 33566 US		Mailing Address 2905 SUTTON PINES CT PLANT CITY, FL 33566 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent TOMBRINK, RICHARD, JR. 21042 DANDY ROAD BROOKSVILLE, FL 34601		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		U00000463454 03/24/06-60031-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TOMBRINK, MARGARET 8526 PEPPERCORN DR. ORLANDO, FL	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BODINE, ELIZABETH 36821 JEFFERSON AVE DADE CITY, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT TOMBRINK, STEVENS E. 2905 SUTTON PINES CT PLANT CITY, FL 33566	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TOMBRINK, RICHARD, JR. 21042 DANDY RD. BROOKSVILLE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 an address with all other like empowered.		
SIGNATURE: 		3/12/06 813-760-4828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #