FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

807 1ST ST NW

PO BOX 1315

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 304913

Principal Place of Business

807 1ST ST NW PO BOX 1315

TILLETT GROVES, INC.

RUSKIN FL 335	7N	RUSKIN FL 33570				DO NOT WRITE IN THIS SPACE			
IQUINT I C VOOTO						3. Date Incorporated or Qualifed			
						05/06/1966			
2 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	A	pplied For	
2. 1 111101pai 1 1	000 01 Dubin 000	26				59-1143516	N	ot Applicable	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					\$8.75	Additional	
2	,	27				5. Certifcate of Status Desired	Fee R	equired	
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be	
3	_	28				Trust Fund Contribution		to Fees	
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year Inte	angible		
4	25	29 3	0	-		Personal Property Tax.	Yes	□No	
]	g. Name and Address of Currer					10. Name and Address of New Registered	Agent		
 -	g. Harrie and Medical Co.			81	Name				
TILLETT, ROY C								· · · · · · · · · · · · · · · · · · ·	
	1ST ST NW			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		•	
RUS			83						
				84	City	EI	85 Zip	Code	
	<u> </u>					<u>rl</u>		o registered	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	, the a	bove-	named corpo	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoin	cnanging it ntment as r	s registerea eaistered	
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	ations of, Section 607.0505, Florid	la Stati	utes.	ne corporation	in a bound of different to the control appear		•	
-									
SIGNATURE	Signature, typed or printed name of registered age	ant and title if applicable. (NOTE: R	egistered	Agent :	signature required				
12.	OFFICERS AI	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PD	☐ DELETE	1.1 TI	TLE			Change	☐ Addition	
NAME	TILLETT, ROY C		1.2 N	AME					
STREET ADDRESS	807 1ST ST NW		1.3 S	TREET	ADDRESS				
CITY-ST-ZIP	RUSKIN, FL 00000		1	ITY-ST-					
TITLE	SD	☐ DELETE	2.1 TI	-			Change	☐ Addition	
NAME	TILLETT, CLAUDIA M	1000	2.2 N	AME					
	OOT ACT OT ARM				ADDRESS				
STREET ADDRESS						·			
CITY-ST-ZIP	RUSKIN, FL 00000	☐ DELETE	2.4 C 3.1 ∏	ITY-ST	- 217		Change	Addition	
TITLE	VD	☐ pereis	1					-	
NAME	TILLETT, TIM A.		3.2 N						
STREET ADDRESS	609 14TH STREET N.W.		3.3 S	TREET	ADDRESS				
CITY-ST-ZIP	RUSKIN FL		_	TY-ST	- ZIP		[] Cha	- Addison	
TITLE	TD	☐ DELETE	4.1 TI	ITLE			Change	Addition	
NAME	TILLETT, DANIEL S.		4. 2 N	NAME					
STREET ADDRESS	1220-6TH STREET S.E.		4.3 S	TREET	ADDRESS				
CITY-ST-ZIP	RUSKIN FL		4.4 C	ITY-ST-	ZIP				
TITLE		☐ DELETE	5.1 TI	MLE			☐ Change	Addition	
NAME			5.2 N	IAME		· · · ·			
			5.3 S	TREET	ADDRESS	• .			
STREET ADORESS			5.4 C	ITY-ST-	· ZIP				
CITY-ST-ZIP		☐ DELETE	6.1 TI				☐ Change	Addition	
TITLE			6.2 N				_ •	_	
NAME					ADDRESS				
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP			6.4 C	TY-ST	-ZIP			<u> </u>	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

FILED

Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90001 034 ***150.00

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