## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 697971** 

Address:

City-St-Zip:

6516 CANARY ST.

SARASOTA, FL 34241

Entity Name: TIMMINS PROPERTY CARE, INC

FILED Apr 26, 2005 Secretary of State

_iicicy ita		THOILITT CARE, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5701 BLO SARASO1	UNT AVE FA, FL 342318	305			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
5701 BLO SARASO1	UNT AVE ΓΑ, FL 342318	305			
FEI Number	: 59-2085911	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
5701 BLÓ SARASOT The above	ΓA, FL 33581	US submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electron	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ST ( TIMMINS, PHY 5701 BLOUNT SARASOTA, FI	AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( TIMMINS, HAR 5701 BLOUNT SARASOTA, FI	AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	P ( TIMMINS, DAV	) Delete ID D	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: HARVEY D. TIMMINS VP 04/26/2005