2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 29, 2004
Secretary of State

DOCUMENT# F21739

Entity Name: TIMSAMLEE ASSOCIATES, INC.

Current Principal Place of Business:

13033 NE JACKSONVILLE HIGHWAY
SPARR, FL 32192

New Principal Place of Business:

Current Mailing Address:

BOX 298 (MAIN STREET)
SPARR, FL 321920298

New Mailing Address:

FEI Number: 59-2302883 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOWARD, SAMUEL B
13838 N.E. 10TH ST. ROAD
SILVER SPRINGS, FL 34489 US

Name and Address of New Registered Agent:

HOWARD, SAMUEL B
P.O. BOX 2340
SILVER SPRINGS, FL 34489 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: SAMUEL B. HOWARD 10/29/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: HOWARD, PAUL LEE,
Address: 28 ALMOND TRAIL
City-St-Zip: OCALA, FL 34472

Title: TDS ( ) Delete
Name: HOWARD, RUTH E.,
Address: 13565 NE 38TH AVE
City-St-Zip: SPARR, FL 32192

Title: VD ( ) Delete
Name: HOWARD, SAMUEL B
Address: 13838 N.E. 10TH ST. RD.
City-St-Zip: SILVER SPRINGS, FL 34489

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: SAMUEL B HOWARD VD 10/29/2004
Electronic Signature of Signing Officer or Director Date