2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21739

Entity Name: TIMSAMLEE ASSOCIATES, INC.

FILED Feb 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13033 NE JACKSONVILLE HIGHWAY SPARR, FL 32192

Current Mailing Address: New Mailing Address:

BOX 298 (MAIN STREET) BOX 298

SPARR, FL 321920298 SPARR, FL 32192

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

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

HOWARD, SAMUEL B P.O. BOX 2340 HOWARD, SAMUEL B P.O. BOX 298

SILVER SPRINGS, FL 34489 US SPARR, FL 32192 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: 02/02/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HOWARD, PAUL LEE, HOWARD, PAUL LEE, Name: Name: P.O. BOX 298 28 ALMOND TRAIL Address: Address: OCALA, FL 34472 City-St-Zip: City-St-Zip: SPARR, FL 32192

Title: TDS () Delete Title: TDS (X) Change () Addition

 Name:
 HOWARD, RUTH E.,
 Name:
 HOWARD, RUTH E.,

 Address:
 13565 NE 38TH AVE
 Address:
 P.O. BOX 298

 City-St-Zip:
 SPARR, FL 32192
 City-St-Zip:
 SPARR, FL 32192

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 HOWARD, SAMUEL B
 Name:
 HOWARD, SAMUEL B

 Address:
 13838 N.E. 10TH ST. RD.
 Address:
 P.O. BOX 298.

 City-St-Zip:
 SILVER SPRINGS, FL 34489
 City-St-Zip:
 SPARR, FL 32192

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 MGR 02/02/2005