

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # G63541

1. Entity Name
FRESH SURROUNDINGS, INC.



Principal Place of Business

% JUDITH TIMMERMAN
761 N. FIG TREE LANE
PLANTATION, FL 33317

Mailing Address

% JUDITH TIMMERMAN
761 N. FIG TREE LANE
PLANTATION, FL 33317



01282008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2333449

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

TIMMERMAN, JUDITH
761 N. FIG TREE LANE
PLANTATION, FL 33317

**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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U000000940243
05/28/08-80060-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	TIMMERMAN, JUDITH	761 N FIG TREE LANE	PLANTATION, FL 00000

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

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IN THIS SPACE**

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: Judith Timmerman (Fees) Judith Timmerman (F54)
Date 4-28-08 Daytime Phone # 583-4035

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR