

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H58223** (9)

1. Corporation Name
TINMAR, INC.



Principal Place of Business

**1920 PALM BEACH LAKES BLVD
SUITE 202
WEST PALM BEACH FL 33409**

Mailing Address

**1920 PALM BEACH LAKES BLVD
SUITE 202
WEST PALM BEACH FL 33409**

3. Date Incorporated or Qualified 05/16/1985	3a. Date of Last Report 08/09/1995
4. FEI Number 59-2561219	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 5841 Corporate Way	26 5841 Corporate Way
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 Suite 100	27 Suite 100
City & State	City & State
23 West Palm Beach, FL	28 West Palm Beach, FL
Zip	Zip
24 33407	29 33407
Country	Country
25 Palm Beach	30 Palm Beach

9. Name and Address of Current Registered Agent

**WILSON, N. GRIFFIN
1920 PALM BEACH LAKES BLVD
SUITE 202
WEST PALM BEACH FL 33409**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 5841 Corporate Way
83 Suite 100
84 City West Palm Beach
85 Zip Code FL 33407

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and board of directors

Signature, typed or printed name of registered agent and board of directors

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDST	1.1 TITLE	☐ Change ☐ Addition
NAME	WILSON, N. GRIFFIN	1.2 NAME	
STREET ADDRESS	1920 PALM BEACH LAKES BLVD	1.3 STREET ADDRESS	
CITY- ST- ZIP	W. PALM BEACH FL 33409	1.4 CITY- ST- ZIP	
TITLE	ST	2.1 TITLE	☐ Change ☐ Addition
NAME	WALDRON, THOMAS	2.2 NAME	
STREET ADDRESS	1920 PALM BCH LAKES BLVD	2.3 STREET ADDRESS	
CITY- ST- ZIP	WEST PALM BEACH FL	2.4 CITY- ST- ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

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***3400.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 and changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
N. Griffin Wilson, Pres.

4-25-96

407-684-4488

CR2E034 (12/95)

5.17.96