

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J72469

Entity Name: TIMOTHY A. WAGONER, INC.

FILED
Feb 06, 2007
Secretary of State

Current Principal Place of Business:

121 MUSTANG WAY
MERRITT ISLAND, FL 32953

Current Mailing Address:

121 MUSTANG WAY
MERRITT ISLAND, FL 32953

New Principal Place of Business:

2555 NORTH COURTENAY PARKWAY
SUITE 30
MERRITT ISLAND, FL 32953

New Mailing Address:

2555 NORTH COURTENAY PARKWAY
SUITE 30
MERRITT ISLAND, FL 32953

FEI Number: 59-2821205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGONER, TIMOTHY A.
1545 S OAKS DRIVE
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HENSLEY, ANTHONY D,
Address: 918 JACK PINE COURT
City-St-Zip: ROCKLEDGE, FL

Title: T () Delete
Name: FLOYD, DAVID,
Address: 936 PINE BAUGH ST.
City-St-Zip: ROCKLEDGE, FL

Title: DVS () Delete
Name: WAGONER, ROBIN,
Address: 4065 NATURE LANE
City-St-Zip: COCOA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HENSLEY, ANTHONY D,
Address: 918 JACK PINE COURT
City-St-Zip: ROCKLEDGE, FL 32955

Title: T (X) Change () Addition
Name: FLOYD, DAVID,
Address: 2555 NORTH COURTENAY PARKWAY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: DVS (X) Change () Addition
Name: WAGONER, ROBIN,
Address: 4065 NATURE LANE
City-St-Zip: COCOA, FL 32926

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ROBIN D WAGONER

D

02/06/2007

Electronic Signature of Signing Officer or Director

Date