

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J77687

FILED
Apr 27, 2006
Secretary of State

Entity Name: TOMLINSON INSTRUMENTS & CONTROLS, INC.

Current Principal Place of Business:

576-E APLEYARD DRIVE
TALLAHASSEE, FL 32304 US

New Principal Place of Business:

Current Mailing Address:

% MARGARET R. TOMLINSON
P.O. BOX 20188
TALLAHASSEE, FL 32316

New Mailing Address:

FEI Number: 59-2877446 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TOMLINSON, MARGARET R.
892 MADERIA CIRCLE
TALLAHASSEE, FL 32312 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: TOMLINSON, MARGARET R
Address: 892 MADERIA CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: RACHAL, SHANNON E
Address: 123 PINECREST AVENUE
City-St-Zip: ORMOND BEACH, FL 32176

Title: D () Delete
Name: MOMBERGER, MARGARET E
Address: 100 N. ST. ANDREWS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: TOMLINSON, WHITNEY A, .
Address: 892 MADERIA CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: RACHAL, SHANNON E
Address: 90 N. ST ANDREWS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

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

Title: D (X) Change () Addition
Name: TOMLINSON, WHITNEY A, .
Address: 1513 COLONIAL DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

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: MARGARET R. TOMLINSON

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

_____ Date