## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Feb 22, 2007 08:00 AM **DOCUMENT # J99921 Secretary of State** TUMBLING PINES, INC. Principal Place of Business Mailing Address 10987 HWY 11 10987 HWY 11 BUNNELL, FL 32110 BUNNELL, FL 32110 02062007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2855804 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DANIELS, DOUGLAS A. DO NOT WRITE 406 NORTH WILD OLIVE AVE SHITE 820 IN THIS SPACE DAYTONA BEACH, FL 32018 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. U000000643202 <u>/ñĭ/ññ-ŝóō78=oo1 150.00</u> SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME HENRY, MORGAN 10987 HWY 11 STREET ADDRESS CITY-ST-ZIP BUNNELL, FL 32110 STD HENRY, LAUREL NAME 10987 HWY 11 STREET ADDRESS CITY-ST-ZIP BUNNELL, FL 32110 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

SIGNATURE: