

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 09, 2004 8:00 am**  
**Secretary of State**

03-09-2004 90033 038 \*\*\*150.00

**DOCUMENT # L06521**

1. Entity Name

TINER AND ASSOCIATES, INC.



Principal Place of Business

4130 N.W. 10TH AVENUE  
FT. LAUDERDALE FL 33309

Mailing Address

4130 N.W. 10TH AVENUE  
FT. LAUDERDALE FL 33309

44016413



MOORE CR2E034 (11/03)

2. Principal Place of Business

16205 Old US 41  
Suite, Apt. #, etc.

3. Mailing Address

16205 Old US 41  
Suite, Apt. #, etc.

City & State

Fort Myers, FL  
33912 USA

City & State

Fort Myers, FL  
33912 USA

4. FEI Number

65-0197886

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

TINER, JAMES  
11481 OSPREY LANDING WAY  
FORT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name TINER, JAMES

Street Address (P.O. Box Number is Not Acceptable)  
11481 OSPREY LANDING WAY

City FORT MYERS FL Zip Code 33908

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, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE PVD ☐ Delete  
NAME TINER, JAMES L.  
STREET ADDRESS 11481 OSPREY LANDING WAY  
CITY-ST-ZIP FORT MYERS FL 33908

TITLE TSD ☐ Delete  
NAME TINER, JEAN M  
STREET ADDRESS 11481 OSPREY LANDING WAY  
CITY-ST-ZIP FORT MYERS FL 33908

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: JEAN TINER JEAN TINER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/04 954-771-7180

Date

Daytime Phone #