## **2008 FOR PROFIT CORPORATION**

## FILED ANNUAL REPORT Feb 07, 2008 08:00 A Secretary of State DOCUMENT # L28855 1. Entity Name MARK TIMOTHY, INC. Principal Place of Business Mailing Address 41 SE FIFTH ST 41 SE FIFTH ST 2ND FLOOR 2ND FLOOR BOCA RATON, FL 33432 BOCA RATON, FL 33432 US No Cha-P 01252008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0152209 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GERSHON, HOLLY G ESQ DO NOT WRITE 1489 W. PALMETTO PARK RD **SUITE 425** IN THIS SPACE BOCA RATON, FL 33486 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS TITLE PULTE, MARK NAME STREET ADDRESS 41 SE 5TH ST 2ND FL CITY-ST-ZIP BOCA RATON, FL 33432 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

12. I hereby certify that the information supplied with this filling dees 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:

STREET ADDRESS CITY-ST-7IP