


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2004 08:00 AM
Secretary of State

DOCUMENT # L53522	
1. Entity Name TIMBER TOPPERS TREE SERVICE, INC.	

Principal Place of Business 8015 VERNA BETHANY ROAD MYAKKA CITY, FL 34251	Mailing Address 8015 VERNA BETHANY ROAD MYAKKA CITY, FL 34251
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DO NOT WRITE IN THIS SPACE



03182004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0191354	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent REIGLE, SHIRLEY B 8015 VERNA BETHANY ROAD MYAKKA, FL 34251

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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 rebating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000095052 03/24/04-80016-015 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVDS REIGLE, SHIRLEY B. 8015 VERNA BETHAM RD MYAKKA CITY, FL 34251
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V REIGLE, ALAN I 8015 VERNA BETHANY ROAD MYAKKA CITY, FL 34251
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Shirley B. Reigle 3/20/04 9413221970
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #