

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003211

FILED
Apr 28, 2007
Secretary of State

Entity Name: TIME TITHERS, INC.

Current Principal Place of Business:

435 S. GULFSTREAM AVENUE
#1101
SARASOTA, FL 342366704 US

New Principal Place of Business:

Current Mailing Address:

435 S. GULFSTREAM AVENUE
#1101
SARASOTA, FL 342366704 US

New Mailing Address:

FEI Number: 65-1144939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HECKER, SUSAN BARRETT
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PERRY, MAXINE
Address: 5312 SIESTA COURT
City-St-Zip: SARASOTA, FL 34242 US

Title: PD () Delete
Name: HIGGINBOTHAM, ALLEN B
Address: 435 S. GULFSTREAM AVENUE #1101
City-St-Zip: SARASOTA, FL 342366704 US

Title: VSTD () Delete
Name: HIGGINBOTHAM, LINDA C
Address: 435 S. GULFSTREAM AVENUE #1101
City-St-Zip: SARASOTA, FL 342366704 US

Title: D () Delete
Name: VOLLRATH, DALE
Address: 5527 AMERICA DRIVE
City-St-Zip: SARASOTA, FL 34231 US

Title: D () Delete
Name: VOLLRATH, MARY ANN
Address: 5527 AMERICA DRIVE
City-St-Zip: SARASOTA, FL 34231 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D () Change (X) Addition
Name: SHEA, JOHN
Address: 4544 QUAIL RUN LANE
City-St-Zip: SARASOTA, FL 34232 US

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLEN B. HIGGINBOTHAM

P/D

04/28/2007

Electronic Signature of Signing Officer or Director

Date