

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 04, 2007 8:00 am
Secretary of State

06-04-2007 90008 001 ****70.00

DOCUMENT # N06000009046

1. Entity Name
TIME OF REFRESHING, INC.



Principal Place of Business
**227 SILVER BEACH RD
LAKE PARK, FL 33403**

Mailing Address
**227 SILVER BEACH RD
LAKE PARK, FL 33403**

40119381



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

8811 Sunset Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01222007 Chg-NP CR2E037 (12/06)

City & State

City & State
Palm Beach Garden, FL

4. FEI Number
01-0743271

☒ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

33410 Palm Beach

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, PORTIA C
227 SILVER BEACH RD
LAKE PARK, FL 33403**

Name **Smith Portia C**
Street Address (P.O. Box Number is Not Acceptable)

8811 Sunset Dr.
City **Palm Beach Garden FL** Zip Code **33410**

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

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **SMITH, PORTIA C**
STREET ADDRESS **227 SILVER BEACH RD**
CITY-ST-ZIP **LAKE PARK, FL 33403**

TITLE **D** ☐ Delete
NAME **RUSSELL, THOMASINA**
STREET ADDRESS **21 CHAMBERLAIN ST**
CITY-ST-ZIP **VERNON, CT 06066**

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 10

TITLE **D** ☒ Change ☐ Addition
NAME **Portia Smith Portia C**
STREET ADDRESS **8811 Sunset Dr.**
CITY-ST-ZIP **Palm Beach Garden, 33410**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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 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 617, 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:

Portia C Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/07
Date

561.255-3293
Daytime Phone #

Portia C Smith