

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 A
Secretary of State

DOCUMENT # N99000000514

1. Entity Name
TIMOTEO FAMILY FOUNDATION, INC.



Principal Place of Business
6109 FOUNTAIN PALM DRIVE
JUPITER, FL 33458

Mailing Address
6109 FOUNTAIN PALM DRIVE
JUPITER, FL 33458



01092008 No Chg-NP

CR2E037 (4/06)

4. FEI Number
65-0889581

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TIMOTEO, REGINALD L
6109 FOUNTAIN PALM DRIVE
JUPITER, FL 33458

**DO NOT WRITE
IN THIS SPACE**

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 reconstituting)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME TIMOTEO, REGINALD L
STREET ADDRESS 6109 FOUNTAIN PALM DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE D
NAME TIMOTEO, MITCHELL
STREET ADDRESS 6109 FOUNTAIN PALM DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE D
NAME SAMUELS, JIM
STREET ADDRESS 6109 FOUNTAIN PALM DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE D
NAME TIMOTEO, JANET B
STREET ADDRESS 6109 FOUNTAIN PALM DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000781708
01/15/08-80045-025 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janet B. Timoteo **JANET B. Timoteo** 1/9/08 (561)262-0404
Date Daytime Phone #