

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000014095

1. Entity Name

Principal Place of Business

TIMBERWOOD HOLDING CO., INC.



Mailing Address

9644 MOON LAKE RD NEW PORT RICHEY, FL 34654

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FILED Mar 27, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

01142008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 59-3695602 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUSSELL, DANIEL C SR 9644 MOON LAKE ROAD NEW PORT RICHEY, FL 34654

DO NOT WRITE IN THIS SPACE

8. The above the obligat	e named entity submits this statement for the ptions of registered agent.	urpose of changing its registered office	or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title in	applicable. (NOTE: Registered Agent sign	thure required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUSSELL, DANIEL C SR 12250 CLEAR LAKE DRIVE NEW PORT RICHEY, FL 34654			U00000871311
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000871311 04/09/08-80125-014 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				•
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby o	certify that the information supplied with this fill on this report or supplemental report is true at	ng does not qualify for the exemptions	contained in Chapter 119	9. Florida Statutes. I further certify that the information

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

C1	CM	ATI	IDE.	

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL C. RUSSELL, SR.

3/25/08

727 379 - 9400

Daytima Phone #