

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000024160

Entity Name: TIMMONS & TIMMONS, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

507 E JEFFERSON ST  
BROOKSVILLE, FL 34601

## New Principal Place of Business:

## Current Mailing Address:

507 E JEFFERSON ST  
BROOKSVILLE, FL 34601

## New Mailing Address:

FEI Number: 59-3716610

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TIMMONS, HARRY P SR.  
9456 WALLIEN DRIVE  
BROOKSVILLE, FL 34601 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TIMMONS, HARRY P SR  
Address: 9456 WALLIEN DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D ( ) Delete  
Name: TIMMONS, MARY TERESA  
Address: 9456 WALLIEN DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D ( ) Delete  
Name: TIMMONS, LISA  
Address: 9456 WALLIEN DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D ( ) Delete  
Name: TIMMONS, HARRY P JR  
Address: 10024 WEEKS DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D ( ) Delete  
Name: TIMMONS, CINTHIA  
Address: 10024 WEEKS DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

## 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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARRY TIMMONS

OFFI

04/30/2009

Electronic Signature of Signing Officer or Director

Date