

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000040653

1. Entity Name
TFR UNLIMITED INC.



Principal Place of Business
**4812 GUERNSEY RD.
MILTON, FL 32571**

Mailing Address
**4812 GUERNSEY RD.
MILTON, FL 32571**



01142007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3641743

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ROWELL, TERRY F
4812 GUERNSEY RD.
MILTON, FL 32571**

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

**000000671069
03/28/07-80014-009 150.00**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROWELL, TERRY F
STREET ADDRESS	4812 GUERNSEY RD.
CITY-ST-ZIP	MILTON, FL 32571
TITLE	VP
NAME	LURVEY, LEISHA L
STREET ADDRESS	4812 GUERNSEY ROAD
CITY-ST-ZIP	PACE, FL 32571
TITLE	SEC
NAME	THOMAS, JOHN L
STREET ADDRESS	PO BOX 612
CITY-ST-ZIP	JAY, FL 32565
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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 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.

SIGNATURE: Terry F. Rowell **Terry F. Rowell** 3-15-07(850)994-5020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #