## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

## Jan 28, 2008 08:00 AM **DOCUMENT # P03000001130 Secretary of State** 1. Entity Name ANYTIME TREETIME, INC. Principal Place of Business Mailing Address 3229 BROOK DR. P.O. BOX 7453 LAKELAND, FL 33811-1643 LAKELAND, FL 33807-7453 01092008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1667533 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNSON, MARK W DO NOT WRITE 3229 BROOK DR. LAKELAND, FL 33811-1643 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, typed or printed name of registered agent and title if applicable (NOTE: Precistored Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE JOHNSON, MARK W NAME 3229 BROOK DR. STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 338111643 U00000799595 01/30/08-80075-022 150.00 TITLE NAME JOHNSON, GENIFER M STREET ADDRESS 3229 BROOK DR. LAKELAND, FL 338111643 City-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS upplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information fital 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 rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or

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