


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 26, 2008 8:00 am
Secretary of State

06-26-2008 90002 003 ***558.75

DOCUMENT # P03000139498 1. Entity Name TIM HILL CARPENTRY INC.					
Principal Place of Business 3826 NORTH WEST 14TH PLACE GAINESVILLE, FL 32605			Mailing Address 3826 NORTH WEST 14TH PLACE GAINESVILLE, FL 32605		
2. Principal Place of Business - No P.O. Box # 2536 NW 119th Ave		3. Mailing Address 2536 NW 119th Ave			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Gainesville FL		City & State Gainesville FL		4. FEI Number 32-0099179	
Zip 32609		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HILL, JOHN T 3826 NORTH WEST 14TH PLACE GAINESVILLE, FL 32605		7. Name and Address of New Registered Agent Name Hill, John T. Street Address (P.O. Box Number is Not Acceptable) 3826 NW 119th Ave City Gainesville FL Zip Code 32609			
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HILL, JOHN T 3826 NORTH WEST 14TH PLACE GAINESVILLE, FL 32605 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Hill, John T. 2536 NW 119th Ave Gainesville FL 32609 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <u>John T. Hill</u> John T. Hill 6-24-2008 (352) 222-0810 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					