2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000171830

1. Entity Name T.S. LILY, INC.



FILED Jan 24, 2007 8:00 am Secretary of State

01-24-2007 90015 033 ***150.00

Principal Place of Business

4574 PRINCESS LABETH CT JACKSONVILLE, FL 32258 Mailing Address

4574 PRINCESS LABETH CT JACKSONVILLE, FL 32258



DO NOT WRITE IN THIS SPACE

01152007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1253889
Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ENGLAND, RUSSELL L 4574 PRINCESS LABETH CT JACKSONVILLE, FL 32258

SIGNATURE:

DO NOT WRITE IN THIS SPACE

Date

| 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 | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financ Trust Fund Contribution. | | | | | \$5.00 May Be Added to Fees | |
| 10. | , OFFICERS AND DIREC | CTORS | | | | |
| ETITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD ENGLAND, RUSSELL L 4574 PRÍNCESS LABETH CT JACKSONVILLE, FL 32258 | | | | | |
| TITLE | SD | | | | | |
| NAME | ENGLAND, WILBUR L | | | | | |
| STREET ADDRESS | 35 TULLAHAH AVE | | | | | |
| CITY-ST-ZIP | JACKSONVILLE, FL 32208 | | | | | |
| TITLE | D | • | | | | |
| NAME | ENGLAND, LINDA K | | | | | |
| STREET ADDRESS | 4574 PRINCESS LABETH CT | | | | | |
| CITY-ST-ZIP | JACKSONVILLE, FL 32258 | | | | DO | NOT WRITE |
| | | | | | | |
| TITLE | | | | | IN | THIS SPACE |
| NAME | | | | | | |
| STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | | | |
| TITLE | | | | | | |
| NAME | | | | | | |
| STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | | | |
| TITLE | | V-T-7-10-1 | | | | |
| NAME | | | | | | |
| STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 1 | | | |
| 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. | | | | | | |

England

SIGNING OFFICER OR DIRECTOR