


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90025 022 ***150.00

DOCUMENT # P05000032870			
1. Entity Name NORTH PORT TOMORROW, INC.			
Principal Place of Business 7911 KENNEDY LANE SARASOTA, FL 34240 US		Mailing Address 7911 KENNEDY LANE SARASOTA, FL 34240 US	
2. Principal Place of Business 5165 FAR OAK CIRCLE Suite, Apt. #, etc.		3. Mailing Address 5342 CLARK ROAD Suite, Apt. #, etc. PMB 188	
City & State SARASOTA, FLORIDA Zip 34238 Country US		City & State SARASOTA, FLORIDA Zip 34233 Country US	
4. FEI Number 20-2572103		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STRICKER, GRETCHEN M 7911 KENNEDY LANE SARASOTA, FL 34240		7. Name and Address of New Registered Agent Name TIMMEL, TIMOTHY P. Street Address (P.O. Box Number is Not Acceptable) 5165 FAR OAK CIRCLE City SARASOTA FL Zip Code 34238	
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: Timothy P. Timmel (TIMOTHY P. TIMMEL) (V) 1/24/06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		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	PRES STRICKER, GRETCHEN M 7911 KENNEDY LANE SARASOTA, FL 34240 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WATERS, J. ALLEN 7040 DEL LAGO DRIVE SARASOTA, FLORIDA 34238 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECR MILLER, WILLIS 4330 OAK VIEW DRIVE SARASOTA, FL 34232 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA MILLER, WILLIS 4330 OAK VIEW DRIVE SARASOTA, FL 34232 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WATERS, J. ALLEN 7040 DEL LAGO DRIVE SARASOTA, FLORIDA 34238 <input checked="" 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	V TIMMEL, TIMOTHY P. 5165 FAR OAK CIRCLE SARASOTA, FLORIDA 34238 <input type="checkbox"/> Change <input checked="" 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: Timothy P. Timmel (TIMOTHY P. TIMMEL)		1/24/06 941-922-8855 Date Daytime Phone #	