

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000120206

Entity Name: TIMOTHY NIGHTINGALE, INC.

FILED
Jan 03, 2007
Secretary of State

Current Principal Place of Business:

152 37TH DRIVE SW
VERO BEACH, FL 32968

New Principal Place of Business:

Current Mailing Address:

152 37TH DRIVE SW
VERO BEACH, FL 32968

New Mailing Address:

FEI Number: 20-3392162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRAN C HERNDON, PA
795 SE PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34984 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NIGHTINGALE, TIMOTHY
Address: 152 37TH AVE SW
City-St-Zip: VERO BEACH, FL 32968

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NIGHTINGALE, TIMOTHY
Address: 152 37TH DRIVE SW
City-St-Zip: VERO BEACH, FL 32968

Title: VP () Change (X) Addition
Name: NIGHTINGALE, DONNA
Address: 152 37TH DRIVE SW
City-St-Zip: VERO BEACH, FL 32968

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY NIGHTINGALE

PRES

01/03/2007

Electronic Signature of Signing Officer or Director

_____ Date