## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000126866

Entity Name: TIPPIN & ASSOCIATES, CO.

FILED May 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5345 SOUTH ORTEGA BLVD 5345 ORTEGA BLVD

SUITE 5 SUITE 5

JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32210

Current Mailing Address: New Mailing Address:

5345 SOUTH ORTEGA BLVD 5345 ORTEGA BLVD

SUITE 5 SUITE 5

JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32210

FEI Number: 04-3826455 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TIPPIN, JESUS T TIPPIN, JASON T 4558 ORTEGA BLVD 4958 ORTEGA BLVD

JACKSONVILLE, FL 32210 US JACKSONVILLE, FL 32210 US

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: JASON TODD TIPPIN 05/03/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: DPST (X) Change () Addition

 Name:
 TIPPIN, JASON T
 Name:
 TIPPIN, JASON T

 Address:
 2770 PARK STREET
 Address:
 4958 ORTEGA BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32205
 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: TIPPIN. TIMOTHY S Name: TIPPIN. TIMOTHY S

Address: 2770 PARK STREET Address: 4958 ORTEGA BLVD
City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 TIPPIN, TERRY
 Name:
 TIPPIN, TERRY

 Address:
 2770 PARK STREET
 Address:
 4958 ORTEGA BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32205
 City-St-Zip:
 JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify 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: TODD TIPPIN PRES 05/03/2007