2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000011360

1. Entity Name
B. TINSLEY ENTERPRISES, INC

Principal Place of Business	Mailing Address
1668 N. HERCULES AVE	1668 N. HERCULES AVE
CLEARWATER, FL 33765	CLEARWATER, FL 33765

DO NOT WRITE IN THIS SPACE

02112008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-4185230	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TINSLEY, ROBERT W II
3999 CHURCH CREEK PT
LARGO, FL 33774

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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 _____

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, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	TINSLEY, ROBERT W II
STREET ADDRESS	3999 CHURCH CREEK PT
CITY-ST-ZIP	LARGO, FL 33774
TITLE	VP
NAME	TINSLEY, PATRICE W
STREET ADDRESS	3999 CHURCH CREEK PT
CITY-ST-ZIP	LARGO, FL 33774
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____ 2/15/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #