

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000060175

FILED
May 02, 2007
Secretary of State

Entity Name: TIM FLOWERS AND ASSOCIATES INC.

Current Principal Place of Business:

106 N APOLLO DR
APOPKA, FL 32703

New Principal Place of Business:

1108 WELCH HILL CIR
APOPKA, FL 32712

Current Mailing Address:

106 N APOLLO DR
APOPKA, FL 32703

New Mailing Address:

1108 WELCH HILL CIR
APOPKA, FL 32712

FEI Number: 84-1710948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLOWERS, TIMOTHY E
106 N APOLLO DR
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

FLOWERS, TIMOTHY E
1108 WELCH HILL CIR.
APOPKA, FL 32712 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:

05/02/2007

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:

Title: DP () Delete
Name: FLOWERS, TIMOTHY E
Address: 106 N APOLLO DR
City-St-Zip: APOPKA, FL 32703

Title: DV () Delete
Name: FLOWERS, CATHLEEN S
Address: 106 N APOLLO DR
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FLOWERS, TIMOTHY E
Address: 1108 WELCH HILL CIR
City-St-Zip: APOPKA, FL 32712

Title: DV (X) Change () Addition
Name: FLOWERS, CATHLEEN S
Address: 1108 WELCH HILL CIR.
City-St-Zip: APOPKA, FL 32712

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: TIMOTHY E. FLOWERS

DP

05/02/2007

Electronic Signature of Signing Officer or Director

Date