2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076794

Entity Name: TLC SHEPPARD ENTERPRISES, INC.

FILED May 01, 2012 Secretary of State

| Current Principal Place of Business: New P | rincipal Place of Business: |
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5109 WOODGREEN LANE LAKELAND, FL 33811

Current Mailing Address: New Mailing Address:

5109 WOODGREEN LANE LAKELAND, FL 33811

FEI Number: 20-5019634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHEPPARD, CATHY A 5109 WOODGREEN LANE LAKELAND, FL 33811 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: SHEPPARD, CATHY A
Address: 5109 WOODGREEN LANE
City-St-Zip: LAKELAND, FL 33811

Title: F

Name: SHEPPARD, CATHY A
Address: 5109 WOODGREEN LANE
City-St-Zip: LAKELAND, FL 33811

Title: S

Name: SHEPPARD, CATHY A
Address: 5109 WOODGREEN LANE
City-St-Zip: LAKELAND, FL 33811

Title: [

Name: SHEPPARD, ALVIN A
Address: 5109 WOODGREEN LANE
City-St-Zip: LAKELAND, FL 33811

Title: VP

Name: SHEPPARD, ALVIN A
Address: 5109 WOODGREEN LANE
City-St-Zip: LAKELAND, FL 33811

Title:

 Name:
 SHEPPARD, ALVIN A

 Address:
 5109 WOODGREEN LANE

 City-St-Zip:
 LAKELAND, FL 33811

I hereby 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 all other like empowered.

SIGNATURE: CATHY A. SHEPPARD PRES 05/01/2012