

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035333

FILED  
Mar 23, 2012  
Secretary of State

**Entity Name:** TIMOTHY WADE BARNETT, INC.

**Current Principal Place of Business:**

1703 MAGNOLIA AVE. #A6  
SOUTH DAYTONA, FL 32119

**New Principal Place of Business:**

**Current Mailing Address:**

1703 MAGNOLIA AVE. #A6  
SOUTH DAYTONA, FL 32119

**New Mailing Address:**

FEI Number: 64-0954751

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARNETT, TIMOTHY  
1703 MAGNOLIA AVE. #A6  
SOUTH DAYTONA, FL 32119 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

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: BARNETT, TIMOTHY  
Address: 1703 MAGNOLIA AVE. #A6  
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: T/S  
Name: BARNETT, TIMOTHY  
Address: 1703 MAGNOLIA AVE. #A6  
City-St-Zip: SOUTH DAYTONA, FL 32119

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: TIMOTHY WADE BARNETT, INC

P/D

03/23/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date