

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000048488

Entity Name: TIM CLINE TRIM, INC.

FILED
Jul 06, 2009
Secretary of State

Current Principal Place of Business:

14353 - 122ND AVENUE NORTH
LARGO, FL 33774

New Principal Place of Business:

14353 122ND AVENUE NORTH
LARGO, FL 33774

Current Mailing Address:

14353 - 122ND AVENUE NORTH
LARGO, FL 33774

New Mailing Address:

14353 122ND AVENUE NORTH
LARGO, FL 33774

FEI Number: 20-8902113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, DONALD R
32 - 21ST STREET NORTH
ST PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

CLINE, TIM
14353 122ND AVENUE NORTH
LARGO, FL 33774 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: TIM CLINE

07/06/2009

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: P,VP () Delete
Name: CLINE, TIM
Address: 14353 - 122ND AVENUE NORTH
City-St-Zip: LARGO, FL 33774

Title: S,T () Delete
Name: CLINE, TIM
Address: 14353 - 122ND AVENUE NORTH
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,VP (X) Change () Addition
Name: CLINE, TIM
Address: 14353 122ND AVENUE NORTH
City-St-Zip: LARGO, FL 33774

Title: S,T (X) Change () Addition
Name: CLINE, TIM
Address: 14353 122ND AVENUE NORTH
City-St-Zip: LARGO, FL 33774

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: TIM CLINE

P

07/06/2009

Electronic Signature of Signing Officer or Director

Date