

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000000759

Entity Name: CINDY TOMPKINS, INC.

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4186 CR 317B  
BUSHNELL, FL 33513

**New Principal Place of Business:**

**Current Mailing Address:**

4186 CR 317B  
BUSHNELL, FL 33513

**New Mailing Address:**

P.O. BOX 42  
BUSHNELL, FL 33513

FEI Number: 51-0671023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOMPKINS, CINDY  
4186 CR 317B  
BUSHNELL, FL 33513 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TOMPKINS, CINDY  
Address: 4186 CR 317B  
City-St-Zip: BUSHNELL, FL 33513

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: CINDY TOMPKINS

PRES

02/18/2010

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

\_\_\_\_\_  
Date