PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000046439

1. Corporation Name

DAND WRITTEN THIS SPACE	TIMMON	S ENTERPRISES, INC.	•			 		
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ACKSONNULE FL 32237 US US DO NOT WRITE IN THIS SPACE 3. Date Incorporate or Qualified 07/01/1993 2. Principal Place of Business 2. A feet Number of Souther of Susiness 2. Suite, Apt. #, etc. 2. City & State 2. City & State 3. Conflicted or Status Desired								
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Application (7/01/1983) 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Application (7/01/1983) 2. Suite, Apt. #, etc. 5. Suite, Apt. #, etc. 7.	JACKSONVILLE FL 32257 JACKSONVILLE FL 32257					DO NOT WRITE IN THIS	SPACE	
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Zip Country Zip Country Zip Country St. This corporation owes the current year intangles Personal Property Tax. Yes No		9	City & State			6. Election Campaign Financing		
Zip Country Zip Country B 30	23		28			Trust Fund Contribution	Added t	o Fees
9. Name and Address of Current Registered Agent TIMMONS, JOHN 10916 MERRYWOOD DRIVE JACKSONVILLE FL 32256 82 Street Address (P.O. Box Number is Not Acceptable) 83 FL 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE TIME PSTD OFFICERS AND DIRECTORS 11. TIME PSTD DELETE 11. TIME PSTD TIMMONS, JOHN 11. TIMMONS, JOHN 12. NAME 13. STREET ADDRESS 14. CITY-ST-2P 14. CITY-ST-2P 10. DELETE 14. TITLE 10. Change 14. Addition 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. STREET ADDRESS 14. CITY-ST-2P 14. CITY-ST-2P 15. TIME 16. Change 17. Change 18. Addition 18. ADDITIONS/CHANGES OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFI		- Country		, ·		,		٦
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11. Pursuant to time provision of Sections 607.0502 and 607.1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE TIME DELETE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ITTLE TIMMONS, JOHN 11. STREET ADDRESS CITY-ST-ZP TIME V TIMMONS, JOHN 1098 MANDARIN STATION DR E 14. CITY-ST-ZP TIME DELETE 22. TIME V TIMMONS, DIANE 22. NAWE 19916 MERRYWOOD DRIVE 23. STREET ADDRESS 10916 MERRYWOOD DRIVE 22. NAWE 10916 MERRYWOOD DRIVE 23. STREET ADDRESS 33. STREET ADDRESS CITY-ST-ZP TIME DELETE 4. TIME DELETE 31. TIME DELETE 32. STREET ADDRESS CITY-ST-ZP TIME DELETE 34. CITY-ST-ZP TIME DELETE 34. CITY-ST-ZP TIME DELETE 35. STREET ADDRESS CITY-ST-ZP TIME DELETE 34. CITY-ST-ZP TIME DELETE 35. STREET ADDRESS CITY-ST-ZP TIME DELETE 35. STREET ADDRESS CITY-ST-ZP TIME DELETE 35. STREET ADDRESS CITY-ST-ZP DELETE 35. STREET ADDRESS C	THE MANY COURTS				Name			
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

☐ DELETE

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90112 008 ***150.00