

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000034383 (7)

1. Corporation Name

TIM'S MECHANICAL WORKS, INC.



Principal Place of Business

122 FINLEY LANE  
ORANGE SPRINGS FL 32182  
US

Mailing Address

P O BOX 336  
ORANGE SPRINGS FL 32182  
US

2. Principal Place of Business

21 122 Finley Lane

Suite, Apt. #, etc.

22

City & State

23 Orange Springs Fl.

Zip

24 32182

Country

25 Putnam

2a. Mailing Address

26 P.O. Box 336

Suite, Apt. #, etc.

27

City & State

28 Orange Springs Fl.

Zip

29 32182

Country

30 Putnam

3. Date Incorporated or Qualified

05/02/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0488075

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

FULTON, TIMOTHY K  
6052 PINE DR  
LANTANA FL 33462

10. Name and Address of New Registered Agent

81 Name

N/A

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with and accept the provisions of, Section 607.0502, Florida Statutes.

SIGNATURE

Timothy K. Fulton (owner) Timothy K. Fulton

4-30-96

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME FULTON, TIMOTHY K  
STREET ADDRESS 6052 PINE DR  
CITY-ST-ZIP LANTANA FL 33462

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

122 Finley Lane, PO Box 336  
Orange Springs, Fl. 32182

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, on an amendment with an address.

SIGNATURE:

Timothy K. Fulton Timothy K. Fulton

4-30-96

352-546-  
2979

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)