**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000062692

TIMES TRAILER PARK, INC.

## **FILED** Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90122 038 \*\*\*150.00



Principal Place of Business Mailing Address  1330 BUDINGER AVENUE 1330 BUDINGER AVENUE ST.CLOUD FL 34769  ST.CLOUD FL 34769						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed		
2. Principal P	lace of Business	2a. Mailing Address					Ar	plied For
21 A	bore	26	<del>-</del> 1			59-3261210	I NO	ot Applicable
Suite, Apt	<u> </u>	Suite, Apt. #, etc				5. Certificate of Status Desired	7	Additional
22	27				5. Cornicate of Glatos Besides	Fee Re	equired	
City & State	ę	City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
Zip	Country	Zıp	Cour	ntry		8. This corporation owes the current year I		(T) A
24	25	<del></del>	30			Personal Property Tax	Yes	□No
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registere	u Age <u>nt</u>	
TUMBLESON, MARY ANN				31	чате			
1330 BUDINGER AVENUE ST.CLOUD FL 34769			İ	82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
			ŀ	83				
01.0								
				84	City	F	85 Zip	Code
SIGNATURE	<del></del>	D DIRECTORS	13.		batic per arcierpis i	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DR\$ IN 12
TITLE	D () DELETE		: 1 TITLE				Change	L Addition
NAME	POFFENBAUGH, FRANCES M		1.2 NA					,
STREET ADDRESS	6134 E. BRONSON HIGHWAY		11		ADDRESS			
CITY-ST-ZIP	ST. CLOUD FL 34771		1.4 CIT		-ZIP		[*] Change	Acdition
TITLE NAME	TUMBLESON, MARY ANN	∑ becere	22 NA					
STREET ADDRESS	1330 BUDINGER AVENUE		ñ		ADDRESS			
CITY-ST-ZIP	1T. CLOUD FL 34769		2 4 CF					
TITLE	52552 72 511 54	DELETE	3 1 717				Change	Addition
NAME			J2NA	ME				
STREET ADDRESS			3 3 STI	REET	ADDRESS			
CITY-ST-ZIP			34 CI	_	T- ZiP		Chance	Addition
TITLE		☐ DELETE	4 1 TIT				Change	☐ Audition
NAME			4 2 NA					
STREET ADDRESS			n		ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CIT 5.1 TIT		- Clb		Change	Addition
TITLE			52 NA					
NAME STREET ADDRESS					ADDRESS			
CITY-S1-ZIP			5.4 CIT					
TITLE		☐ DELETE	6 1 TIT	LE	<u> </u>		Change	noitit bA
NAME			6 2 NA	λŀΕ				
STREET ADDRESS			6 3 ST	REET	ADDRESS			
	I		N		c zup			

SIGNATURE: