

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000054869

Entity Name: TIMBERWOLF, INC.

FILED
Mar 06, 2009
Secretary of State

Current Principal Place of Business:

3987 NORTH "W" ST
15
PENSACOLA, FL 32505

New Principal Place of Business:

3987 NORTH
15
PENSACOLA, FL 32505

Current Mailing Address:

3119 ALBERT CT
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-3386183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOND, WILLIAM A
25 WEST BOVERNMENT STREET
PENSACOLA, FL 32502 US

Name and Address of New Registered Agent:

BOND, WILLIAM A
25 WEST GOVERNMENT STREET
PENSACOLA, FL 32502 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: _____

Electronic Signature of Registered Agent

03/06/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BENSON, WILLIAM R
Address: 3119 ALBERT CT
City-St-Zip: PENSACOLA, FL 32504

Title: DS () Delete
Name: BENSON, EILEEN C
Address: 3119 ALBERT CT
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EILEEN BENSON

VP

03/06/2009

Electronic Signature of Signing Officer or Director

Date