

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P96000078771

1. Entity Name
TYMBER CREEK 7, INC.



**FILED
Apr 28, 2006 8:00 am
Secretary of State**

04-28-2006 90177 040 ***150.00

40069635



01062006 Chg-P CR2E034 (11/05)

Principal Place of Business
444 SEABREEZE BLVD
SUITE 1000
DAYTONA BEACH, FL 32118

Mailing Address
444 SEABREEZE BLVD
SUITE 1000
DAYTONA BEACH, FL 32118

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number
59-3402490

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TOWER, DEVIN
444 SEABREEZE BLVD STE 1000
DAYTONA BEACH, FL 32118

Name
Charles S. Lichtigman

Street Address (P.O. Box Number is Not Acceptable)
444 Seabreeze Blvd.

Suite 1000

City Daytona Beach FL Zip Code 32118

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when reinstating)

DATE 4/20/06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D HOLUB, PAUL F JR
NAME
STREET ADDRESS PO BOX 730086
CITY-ST-ZIP ORMOND BEACH, FL 32173

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE D HOLUB, PAUL F SR
NAME
STREET ADDRESS PO BOX 730086
CITY-ST-ZIP ORMOND BEACH, FL 32173

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE D LICHTIGMAN, CHARLES S
NAME
STREET ADDRESS 444 SEABREEZE BLVD STE 1000
CITY-ST-ZIP DAYTONA BEACH, FL 32118

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE D TOWER, DEVIN
NAME
STREET ADDRESS 444 SEABREEZE BLVD STE 1000
CITY-ST-ZIP DAYTONA BEACH, FL 32118

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature and Timed or Printed Name of Signing Officer or Director

4/18/06 3862383600
Date Daytime Phone #