



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 8:00 am
Secretary of State

02-06-2008 90036 037 ***150.00

DOCUMENT # P97000047283					
1. Entity Name TIMOTHY R. GROSS, P.A.					
Principal Place of Business 1755 W BRANDON BLVD A BRANDON, FL 33511-4860 US			Mailing Address 1755 W BRANDON BLVD A BRANDON, FL 33511-4860 US		
2. Principal Place of Business - No P.O. Box # <i>Same as above</i>		3. Mailing Address <i>Same as above</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01282008 Chg-P CR2E034 (12/06)	
City & State		City & State		4. FEI Number 65-0746934	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MEEKS, R H 804 CANOE STREET BRANDON, FL 33510-3504			7. Name and Address of New Registered Agent Name <i>N/A</i> Street Address (P.O. Box Number is Not Acceptable) City <i>FL</i> Zip Code		
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 <i>[Signature]</i> <small>Signature, typed or printed name of registered agent, and title if applicable</small>				DATE <i>2-1-8</i>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GROSS, TIMOTHY R 5104 BROKEN SOUND LAKE VALRICO, FL 335948226 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GROSS, KATHY J 5104 BROKEN SOUND LANE VALRICO, FL 335948226 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <i>2-1-8</i> Daytime Phone <i>813-245-1993</i>	

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40019114

Document Number P97000047283

Business Entity Name TIMOTHY R. GROSS, P.A.

FEI Number 65 - 0746934

FEI Number Status Listed Above Applied For Not Applicable

Certificate of Status Desired Yes No \$8.75 each

Election Campaign Financing Trust Fund Contribution Yes No

Principal Place of Business

Address 1755 W BRANDON BLVD (PO Box not acceptable)

Suite, Apt. #, etc. A

City, State BRANDON , FL

Zip Code & Country 335114860 US

Mailing Address

If your mailing address is the same as the principal address above, please check the box below. Otherwise your mailing address.

☐ Mailing address same as principal address

Address 1755 W BRANDON BLVD

Suite, Apt. #, etc. A

City, State BRANDON , FL

Zip Code & Country 335114860 US

Name And Address of Registered Agent

Name (Last, First, Middle, Title) MEEKS , R , H ,

- OR -

Business to serve as RA

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40019114

804 CANOE STREET

(PO Box not acceptable)

Street Address In Florida

Suite, Apt. #, etc.

City, State

BRANDON

, FL

Zip Code & Country

335103504 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

Officer/Director Name And Address**Name And Address #1**

Title

PD

Name (Last, First, Middle, Title)

GROSS

, TIMOTHY

, R

- OR -

Entity Name to serve as Officer/Director

Street Address

5104 BROKEN SOUND LAKE

City, State

VALRICO

, FL

Zip Code & Country

335948226

Name And Address #2

Title

VSD

Name (Last, First, Middle, Title)

GROSS

, KATHY

, J

- OR -

Entity Name to serve as Officer/Director

Street Address

5104 BROKEN SOUND LANE

City, State

VALRICO

, FL

Zip Code & Country

335948226

Name And Address #3

Title

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City, State

Zip Code & Country

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P97000047283

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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