2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000059721

1. Entity Name

TIMBERWAY DEVELOPMENT GROUP, INC.



FILED
Apr 13, 2007 08:00 AM
Secretary of State

Principal Place of Business

2888 REMINGTON GREEN LANE

STE. C

TALLAHASSEE, FL 32308 US

Mailing Address

2888 REMINGTON GREEN LANE

STE. C

TALLAHASSEE, FL 32308 US



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04102007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3466032

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PADGETT, TIMOTHY D ESQ 2810 REMINGTON GREEN CIR TALLAHASSEE, FL 32308

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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

10.

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

OFFICERS AND DIRECTORS

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

IV.	OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HARVELL, BRADLEY S 2888 REMINGTON GREEN LANE, STE. C TALLAHASSEE, FL 32308	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILSON, AKILA R 2888 REMINGTON GREEN LANE, STE C TALLAHASSEE, FL 32308	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		

000000705594 04/23/07-80058-013 150.00

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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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/0/17 (850) 561-1053