

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000040123

FILED
Apr 28, 2005
Secretary of State

Entity Name: TIM LONGWELL LAWN SERVICE, INC.

Current Principal Place of Business:

5778 TWISTED OAK COURT
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

5778 TWISTED OAK COURT
PACE, FL 32571

New Mailing Address:

FEI Number: 59-3516905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, J. STEVEN ESQ.
107 N. PALAFOX ST.
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

FORD, J. STEVEN ESQ.
307 SOUTH PALAFOX 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:

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LONGWELL, TIMMY L JR
Address: 10717 SAWARA DRIVE
City-St-Zip: PENSACOLA, FL 32506

Title: VP () Delete
Name: SEAGER, DONELL L
Address: 5778 TWISTED OAK COURT
City-St-Zip: PACE, FL 32571

Title: S () Delete
Name: LONGWELL, TIMMY L JR
Address: 10717 SAWARA DRIVE
City-St-Zip: PENSACOLA, FL 32506

Title: T () Delete
Name: SEAGER, DONELL L
Address: 5778 TWISTED OAK COURT
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: DONELL L. SEAGER

VP

04/28/2005

Electronic Signature of Signing Officer or Director

Date