

**2006 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000060893

1. Entity Name
TIGER LILY CORPORATION



Principal Place of Business

**643 N. MILLS AVENUE
ORLANDO, FL 32803**

Mailing Address

**643 N. MILLS AVENUE
ORLANDO, FL 32803**



01162006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3534174

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**THOMPSON, THERESE H
643 N. MILLS AVENUE
ORLANDO, FL 32803**

**DO NOT WRITE
IN THIS SPACE**

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

**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**

U00000520424
05/02/06-80096-001 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME THOMPSON, CHARLES D
STREET ADDRESS 7624 DEBEAUBIEN DRIVE
CITY-ST-ZIP ORLANDO, FL 32835

TITLE D
NAME THOMPSON, THERESA H
STREET ADDRESS 7624 DEBEAUBIEN DRIVE
CITY-ST-ZIP ORLANDO, FL 32835

TITLE D
NAME PHAN, HUNG
STREET ADDRESS 10533 SEPAL CT
CITY-ST-ZIP ORLANDO, FL 32825

TITLE D
NAME PHAN, TUYET
STREET ADDRESS 10533 SEPAL CT
CITY-ST-ZIP ORLANDO, FL 32825

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

X-251

14 April 2006

407 280-6000