2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000078261 Jul 20, 2000 8:00 am 1. Entity Name Secrétary of State TIMMY TOBACCO, INC. 07-20-2000 90020 020 ***150.00 Principal Place of Business Mailing Address 681 8TH STREET, N.E. 681 8TH STREET, N.E. NAPLES FL 34120 NAPLES FL 34120 Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3529997 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILLIS, TIM Street Address (P.O. Box Number is Not Acceptable) 681 8TH STREET, N.E. NAPLES FL 34120 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. SIGNATURE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 "Trust Fund Contribution. Added to Fees . (See criteria on back) - ---Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **DPVS** TITLE TITLE Change ☐ Addition ☐ Delete WILLIS, TIM NAME NAME **681 8TH ST NE** STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34120 Change ☐ Addition TITLE ☐ Detete TITLE WILLIS, TIM NAME NAME STREET ADDRESS **681 8TH ST NE** STREET ADDRESS CITY-ST-ZIP NAPLES FL 34120 CITY-ST-ZIP ☐ Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change TITLE Delete TITLE

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

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

<u>skanulig</u> required

7-5-00

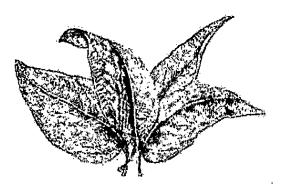
941) 262-2128

Daytime Phone #

TIMMY TOBACCO, INC.

P9800007826/CARtachmen) ADDLESCETT

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July 6, 2000=

To Whom It May Concern:

Enclosed is a check for \$150.00 as requested by your department as per a telephone conversation on 07-06-2000 pertaining to the absence of a "First Notice" of the "2000 Uniform Business Report" fee. We did not receive the First notice and anticipate your acceptance of this payment and can only hope your department will avoid such discrepancies in the future.

Respectfully,

Tim Willis - president Timmy Tobacco, Inc.