2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2005 08:00 AM Secretary of State

DOCUI 1. Entity Nam TIM GILLI		1			Seci	etary of State
Principal Place PO BOX 592 DELAND, FL	5	ailing Address 133 GLEN WOOD ROAD ELAND, FL 32720-2133)		15 00110 0110 E 1000 1100 1100 1100 1100
1	The state of the s					
				03252005	No Chg-P	CR2E034 (10/03)
DO NOT WRITE IN THIS SPACE				4. FEI Number 59-355278	30	Applied For Not Applicable
		The state of the s		5. Certificate of St	latus Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Regis					
GILLEM, TIMOTHY 1133 GLEN WOOD ROAD DELAND, FL 32720			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						
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			ncing _ \$5.	.00 May Be ed to Fees		
10.	OFFICERS AND DIREC	CTORS			<u>- :==: </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GILLEM, TIMOTHY 1133 GLEN WOOD ROAD DELAND, FL 32720	U00000303567 				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. 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 an officer or director of the corporation or the receiver or trustee empowered of the corporation or the receiver or trustee empowered of the corporation or the receiver or trustee empowered of the corporation or the receiver or trustee empowered of the corporation or on an attachment with an across, with the other library of the receiver of the receiver of trustee empowered.						
SIGNATURE: U-11-05 386-527-12-41 EXCHATURE AND TYPED ON FINITED NAME OF SIGNING OFFICER ON DIRECTOR Date Date Date Description Proces 4						