

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000092741

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** TIM LUBEE'S WELL DRILLING & PUMP SERVICE, INC.

**Current Principal Place of Business:**

15141 GARSON LOOP  
BROOKSVILLE, FL 34610

**New Principal Place of Business:**

**Current Mailing Address:**

15141 GARSON LOOP  
BROOKSVILLE, FL 34610

**New Mailing Address:**

P.O. BOX 70  
LAND O LAKES, FL 34639

**FEI Number:** 59-3606408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LUBEE, THIMOTHY L  
11133 BELL TOWER STREET  
SPRING HILL, FL 34608 US

**Name and Address of New Registered Agent:**

LUBEE, THIMOTHY L  
15141 GARSON LOOP  
SPRING HILL, FL 34610 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/19/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LUBEE, TIMOTHY L  
Address: 15141 GARSON LOOP  
City-St-Zip: SPRING HILL, FL 34610

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY L. LUBEE

PRES

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date