SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 30 AM 9:52

DOCUMENT # **S27366** **(1)**

1. Corporation Name

TOMLINSON ENTERPRISES, INC.

Principal Place of Business	Mailing Address
4010 EILAND DRIVE SEBRING FL 33872	4010 EILAND DRIVE SEBRING FL 33872

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/24/1991**
3a. Date of Last Report: **03/18/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29 — County — 25 / 30

4. FEI Number: **59-3047171** — ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation has subsidy for exemption tax under s. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

TOMLINSON, WILLIAM H.
4010 EILAND DRIVE
SEBRING FL 33872

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Florida accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505 Florida Statutes.

SIGNATURE(S)

12. OFFICERS AND DIRECTORS

D TOMLINSON, WILLIAM H. 4010 EILAND DR SEBRING FL	
D TOMLINSON, BECKY 4010 EILAND DR SEBRING FL	

13. ADDITIONAL OFFICERS AND DIRECTORS — ☐ Change ☐ Add

14. I hereby certify that the information supplied with this filing is accurate, complete and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: Becky Tomlinson — 6/14/95 — (813) 471-0257
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR — Daytime Phone #

0104200 CP

CR2E034 (3/95)