

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

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

DOCUMENT # S89062

1. Entity Name
TILLER FOODS, INC.



Principal Place of Business
**3803 E COLUMBUS DR
P.O. BOX 5088
TAMPA, FL 33675**

Mailing Address
**2200 CARDIGAN AVE.
P.O. BOX 333
COLUMBUS, OH 43216-0333 US**



01032005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3094253

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**TILLER, WILLIAM BRADLEY
3803 E COLUMBUS DR
TAMPA, FL 33605**

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TILLER, WILLIAM, B 3803 E COLUMBUS DR TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TILLER, DONALD, H, JR 5820 EXECUTIVE BLVD HUBER HEIGHTS, OH
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S OSBORNE, VICKIE 3803 E COLUMBUS DR TAMPA, FL
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04/14/05-80040-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Vickie A. Osborne

Secretary

VICKIE A. OSBORNE

(813) 621-3067

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Days/Phone #