FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V18045

(7)

TYMES TWO, INC.

Principal Place of Business 171 SANDPINE COURT ST. CLOUD FL 34771	Mailing Address 171 SANDPINE COURT ST. CLOUD FL 34771-9615	171 SANDPINE COURT			
			3. Date Incorporated or Qualified 02/24/1992	3a. Date of Last Report 05/24/1996	
2. Principal Place of Business 21 (6) SANOPINE	2a. Mailing Address 26 1/0 5A	NOPINEC	4. FEI Number 59-3112483	Applied For Not Applicable	
Suite, Apt #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City 8 State 23 St. CLOUD, F1	City & State	D, FI.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24 34771 25 Osceol	a 29 34771 31	Chuntry OSCEO		Yes No	
9. Name and Address of 0	Current Registered Agent		10. Name and Address of New F	legistered Agent	
MOSELEY, FREDERICK R., IV		61 Name			
171 SANDPINE COURT ST. CLOUD FL 34771		82 Street	Address (P.O. Box Number is Not Accepta	able)	
		83			
		84 City	A STATE OF THE STA	FL 85 Zip Code	
 Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent. Fam familiar with, and accept the 	State of Florida, Such change was auf	horized by the corr	corporation submits this statement for the poration's board of directors. I hereby acc	purpose of changing its registered ept the appointment as registered	
SIGNATURE Just M	usiley FRED 1	NOSELEY Registered Agent signature	required when reinstaking)	3-27-97	
Signature, type of or printed name of regist 12. OFFICE 6	AS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF		
TILLE PD	DELETE	1.1 TITLE		Change Addition	
MOSELEY, FREDERICK R	t.,IV	1.2 NAME			
STREET ADDRESS 171 SANDPINE COURT		13 STREET ADDRESS			
City - S1 - ZiP ST. CLOUD FL		1.4 CITY+ST-ZIP			
TITLE STD	DELETE	2.1 TITLE		Change Addition	
NAME MOSELEY, BETSY D.		2.2 NAME			
STREET ADDRESS 171 SANDPINE COURT		2.3 STREET ADDRESS			
CHY-ST-ZPP ST. CLOUD FL		2. 4 CITY-ST-ZIP			
TITLE	DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
O(2) (C) (2)()		A A CUTY OF TID	Y		

6.4 CITY-SI-ZIP

14. I do 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 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 arri 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 if changed, or on an attachment with an address.

4.1 TITLE

4.2 NAME 4.3 STREET ADDRESS

5.1 TITLE 5.2 NAME

61 TITLE

6.2 NAME

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADORESS CITY: \$1:20

D:TY - S1 - ZIP

FILE WOLLD FRED MOSELEY
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

3-27-97

FILED

Apr 02 1997 8:00am

Secretary of State

401-892-32

Change

Change

Change

Addition

Addition

Addition