


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # V49688 1. Entity Name TIMELESS MEMORIES, INC.	
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Principal Place of Business 18218 NORTH 30TH STREET LUTZ, FL 33559	Mailing Address 18218 NORTH 30TH STREET LUTZ, FL 33559
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04262006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3132502	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent ESTLER, JAMES WILLIAM 18218 NORTH 30TH STREET LUTZ, FL 33559

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: James W. Estler, President DATE: 4/26/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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	P ESTLER, JAMES W. 18218 N 30TH ST LUTZ, FL 33559
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: James W. Estler, President DATE: 4/26/06 DAYTIME PHONE #: (813) 949 1575
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR