

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004240

Entity Name: TIME TO SHINE UNITED INC A NON-PROFIT CORPORATION**Current Principal Place of Business:**4375 WOODBINE ROAD
PACE, FL 32571**Current Mailing Address:**4375 WOODBINE ROAD
PACE, FL 32571**FEI Number:** 46-2699495**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAMPBELL, RUTH
4375 WOODBINE ROAD
PACE, FL 32571 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_____
Date**Officer/Director Detail :**

Title	DPS
Name	CAMPBELL, RUTH
Address	4375 WOODBINE ROAD
City-State-Zip:	PACE FL 32571

Title	VT
Name	CAMPBELL, DONALD W
Address	4375 WOODBINE ROAD
City-State-Zip:	PACE FL 32571

Title	D
Name	MAINE, JANICE
Address	4375 WOODBINE ROAD
City-State-Zip:	PACE FL 32571

Title	D
Name	AMICO-SING, PEGGY
Address	4375 WOODBINE ROAD
City-State-Zip:	PACE FL 32571

Title	PVST
Name	CAMPBELL, RUTH
Address	4375 WOODBINE ROAD
City-State-Zip:	PACE FL 32571

Title	D
Name	CAMPBELL, RUTH
Address	4375 WOODBINE ROAD
City-State-Zip:	PACE FL 32571

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RUTH CAMPBELL**EXECUTIVE DIRECTOR****01/09/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date