

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 457246

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: TUCKER EQUIPMENT RENTAL AND SALES, INC.

**Current Principal Place of Business:**

113-11TH ST  
NEPTUNE BCH, FL 32266 US

**New Principal Place of Business:**

**Current Mailing Address:**

113-11TH ST  
NEPTUNE BCH, FL 32266 US

**New Mailing Address:**

FEI Number: 59-1543743      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PERSONS, ROBERT JR.  
2215 S. 3RD ST., SUITE 101  
JACKSONVILLE BEACH, FL 32250 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: TISON, CATHY  
Address: 1453 MANATEE COVE  
City-St-Zip: ORANGE PARK, FL 32003

Title: P ( ) Delete  
Name: TISON, JAMES L III,  
Address: 1453 MANATEE COVE  
City-St-Zip: ORANGE PARK, FL 32003

Title: V ( ) Delete  
Name: KRAUS, FRANK A JR,  
Address: 5304 BEDFORD RD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Delete  
Name: RICHARDS, JEAN,  
Address: 1885 HICKORY LANE  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D (X) Delete  
Name: RICHARDS, JOSEPHINE D  
Address: 1633 PARK TERR E  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D (X) Delete  
Name: RICHARDS, KENNETH G,  
Address: 1885 HICKORY LANE  
City-St-Zip: ATLANTIC BEACH, FL 32233

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES L TISON

P

04/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date