

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004149

Entity Name: TUCKER CAPITAL, INC.

FILED  
Mar 01, 2011  
Secretary of State

**Current Principal Place of Business:**

1675 SW MARLOW AVE  
SUITE 403  
PORTLAND, OR 97225

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10446  
PORTLAND, OR 97296

**New Mailing Address:**

FEI Number: 93-1258773

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: LAVERDE, WILLIAM E  
Address: P.O. BOX 10446  
City-St-Zip: PORTLAND, OR 97296

Title: S  
Name: LAVERDE, JULIE T  
Address: P.O. 10446  
City-St-Zip: PORTLAND, OR 97296

Title: CFO  
Name: BOADWAY, TIMOTHY  
Address: PO BOX 10446  
City-St-Zip: PORTLAND, OR 97296

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

SIGNATURE: WILLIAM E LAVERDE

CP

03/01/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date