


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 FEB -8 AM 9:57

DOCUMENT # G41938
1. Entity Name
TRUDO LETSCHERT CORPORATION



Principal Place of Business: 1510 S TUTTLE AVE, SARASOTA, FL 34239
Mailing Address: 1510 S TUTTLE AVE, SARASOTA, FL 34239

DO NOT WRITE IN THIS SPACE

02062006 No Chg-P CR2E034 (11/05)
4. FEI Number: 59-2316178 Applied For: Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LETSCHERT, TRUDO
1510 S TUTTLE AVENUE
SARASOTA, FL 34239

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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 _____ DATE _____
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	PST LETSCHERT, TRUDO 1510 S TUTTLE AVE SARASOTA, FL 34239
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02/17/06--01014--004 **150.00

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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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____