

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000037343

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: CACURI, INC.

**Current Principal Place of Business:**

2640-A MITCHAM DRIVE  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

2640-A MITCHAM DRIVE  
TALLAHASSEE, FL 32308

**New Mailing Address:**

FEI Number: 59-3444671      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CARROLL, FREDERICK III  
2640-A MITCHAM DRIVE  
TALLAHASSEE, FL 32308      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: PD ( ) Delete  
Name: CARROLL, FREDERICK III  
Address: 520 SHORT ST  
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD ( ) Delete  
Name: RICHARDSON, SHARON C III  
Address: A13 CELTIC RD.  
City-St-Zip: TALLAHASSEE, FL 32317

Title: TD ( ) Delete  
Name: CUTRIGHT, STEPHEN D III  
Address: 7485 CREEKRIDGE CIR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D (X) Delete  
Name: DUPREE, ABBY F  
Address: 1995 HICKORY TREE LN  
City-St-Zip: TALLAHASSEE, FL 32303

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

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

Title: VD (X) Change ( ) Addition  
Name: DUPREE, ABBY F  
Address: 1995 HICKORY TREE LN  
City-St-Zip: TALLAHASSEE, FL 32303

Title: ST (X) Change ( ) Addition  
Name: BROTHERS, KATHLEEN E  
Address: 3748 BILTMORE AVENUE  
City-St-Zip: TALLAHASSEE, FL 32311

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FREDERICK CARROLL III

P

01/04/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date