

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 28, 2004 08:00 AM
Secretary of State**

DOCUMENT # F82457

**1. Entity Name
PECK REALTY COMPANY**



**Principal Place of Business
718 2-B S.W. PORT ST. LUCIE BLVD.
PALM CITY, FL 34990**

**Mailing Address
718 2-B S.W. PORT ST. LUCIE BLVD.
PORT ST LUCIE, FL 34953**



02112004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2193622

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

5. Name and Address of Current Registered Agent

**PECK JR, ALDEN F
3726 SW BRASSIE WAY
PALM CITY, FL 33490**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution.** ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D
NAME PECK, KEVIN O
STREET ADDRESS 1418 NE OAK BLUFF WAY
CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE DV
NAME PECK, ALDEN F. SR.
STREET ADDRESS 1476 NW WATERFALL BLVD.
CITY-ST-ZIP PALM CITY, FL 34990

TITLE PTS
NAME PECK, ALDEN F JR
STREET ADDRESS 3726 SW BRASSIE WAY
CITY-ST-ZIP PALM CITY, FL 34990

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

U000000070672
03/01/04-80047-024 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Alden F. Peck, Jr. **Alden F. Peck, Jr.** 2-12-04 772-879-9777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #