

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 152073

1. Entity Name

TOM COOK, JEWELER, INC.



Principal Place of Business

TOM COOK JEWELER, INC

150 S. BEACH ST.

DAYTONA BEACH, FL 32114

Mailing Address

TOM COOK JEWELER, INC

150 S. BEACH ST.

DAYTONA BEACH, FL 32114

FILED
Jan 18, 2005 08:00 AM
Secretary of State



01132005

No Chg-P

CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-0570692

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COOK, SHERYL A.

150 S BEACH ST

DAYTONA BEACH, FL 32114

**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, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	COOK, SHERYL A.
STREET ADDRESS	150 S BEACH ST
CITY-ST-ZIP	DAYTONA BEACH, FL
TITLE	ST
NAME	LEONHARDT, VICTORIA COOK
STREET ADDRESS	150 S BEACH ST
CITY-ST-ZIP	DAYTONA BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/18/05-80008-021 150.00

**DO NOT WRITE
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)(f), 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 #

1/13/05 386-255-1468