

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90039 011 ***150.00

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01132006 Chg-P CR2E034 (11/05)

DOCUMENT # 266273 1. Entity Name UPCO, INC.					
Principal Place of Business 68 MAMMOTH GROVE RD P.O. BOX 231 LAKE WALES, FL 33898-7330			Mailing Address 68 MAMMOTH GROVE RD P.O. BOX 231 LAKE WALES, FL 33898-7330		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1000122	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UPDIKE, LAWRENCE C SR 68 MAMMOTH GROVE RD P.O. BOX 231 LAKE WALES, FL 33859-0231			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAMUEL, UPDIKE D SR 68 MAMMOTH GROVE ROAD LAKE WALES, FL 338987330		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD UPDIKE, JOHN C., JR. 68 MAMMOTH GROVE ROAD LAKE WALES, FL 338987330		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOFF, KENNETH J 68 MAMMOTH GROVE RD LAKE WALES, FL 338987330		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD UPDIKE, LAWRENCE C. 68 MAMMOTH GROVE RD LAKE WALES, FL 338987330		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SAMUEL, UPDIKE JR 68 MAMMOTH GROVE RD LAKE WALES, FL 338987330		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D UPDIKE, JR, SAMUEL 68 MAMMOTH GROVE RD LAKE WALES, FL 338987330	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD UPDIKE, KEVIN M 68 MAMMOTH GROVE RD. LAKE WALES, FL 338987330		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D UPDIKE, KEVIN M 68 MAMMOTH GROVE RD LAKE WALES, FL 338987330	
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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Samuel D. Updike <small>Date</small>		
			1/27/06 <small>Daytime Phone #</small>		
			863-696-1487		

UPCO, Inc.
Post Office Box 231
Lake Wales, Florida 33859-0231
Phone (863) 696-1487 FAX (843) 696-2617

ATTACHMENT

February 8, 2005

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ADDENDUM TO: CORPORATION ANNUAL REPORT FOR 2005
Block 11. Additions/Changes to Officers and Directors in 10
Page 1 of 1

7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY-ST-ZIP	VD John C. Updike, III 68 Mammoth Grove Road Lake Wales, FL 33898-7330	<input checked="" type="checkbox"/> DELETE
8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY-ST-ZIP	D Abigail A. Updike 68 Mammoth Grove Road Lake Wales, FL 33898-7330	<input checked="" type="checkbox"/> ADDITION
9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY-ST-ZIP	D W. Scott Herndon 68 Mammoth Grove Road Lake Wales, FL 33898-7330	<input checked="" type="checkbox"/> ADDITION
10.1 TITLE 10.2 NAME 10.3 STREET ADDRESS 10.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.1 TITLE 11.2 NAME 11.3 STREET ADDRESS 11.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 13.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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ADDENDUM TO: *CORPORATION ANNUAL REPORT FOR 2005*
Block 10. Officers and Directors
Page 1 of 1

7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY-ST-ZIP	Asst. Secy/Asst T Susannah S. Peddie 68 Mammoth Grove Road Lake Wales, FL 33898-7330	<input type="checkbox"/> DELETE
8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY-ST-ZIP		<input type="checkbox"/> DELETE
9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY-ST-ZIP		<input type="checkbox"/> DELETE
10.1 TITLE 10.2 NAME 10.3 STREET ADDRESS 10.4 CITY-ST-ZIP		<input type="checkbox"/> DELETE