


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # 288694 1. Entity Name SOUTHSIDE PACKAGE & LOUNGE, INC.	
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Principal Place of Business 1140 SOUTH FLORIDA AVE LAKELAND, FL 33803	Mailing Address 1140 SOUTH FLORIDA AVE LAKELAND, FL 33803
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03252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1086328	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**TUCKER, HENRY E.
1140 S. FLA AVE.
2318 COVENTRY AVE
LAKELAND, FL 33803**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**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	STD TUCKER, J.G. 2408 COVENTRY AVENUE LAKELAND, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD TUCKER, H.E. 2318 COVENTRY AVENUE LAKELAND, FL 00000
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD TUCKER, C.A. 2318 COVENTRY AVE LAKELAND, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD TUCKER, JH 2408 COVENTRY AVE LAKELAND, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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05/13/06-80071-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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

Henry E Tucker **Henry E Tucker** 4/24/06 867-683-4707