## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 520696

(6)

**TUCKER PRINTING, INC.** 

**FILED** Apr 21 1998 8:00am Secretary of State

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Principal Place of Business		Mailing Address			I INDIAN BUILD BUI			
4106 W CYPF TAMPA FL 33		4106 W CYPRESS ST TAMPA FL 33607			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					12/21/1976	12/21/1976		
2. Principal Place of Business		2a. Mailing Addros	2a. Mailing Addross		4. FEI Number Applied For			
21		26			<b>59-1707561</b> Not Applicab	le		
Suite, Apt.	#, etc.	Suite, Apt. #, et	c.		5. Certificate of Status Desired S8.75 Additional Fee Required			
City & Stat	le	City & State			6. Election Cempaign Financing \$5.00 May Be Trust Fund Contribution			
Zip 24	Country 25	Ζιρ <b>29</b>	Cour <b>30</b>	ntry	9 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XYes No			
	g. Name and Address of Cur	10. Name and Address of New Registered Agent						
	CKER, RONALD W			81	Name			
	06 W CYPRESS ST MPA FL 33607			82	Street Address (P.O. Box Number is Not Acceptable)			
				83				
				84	City 85 Zip Code	-		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. If hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typed or printed name of registered agent and to	r if applicable (NOI)	Registered Agent signature requ	red when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		<b>I</b> 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CEO	DETETE	1.1 1ITLF	Change		
NAME	TUCKER, RONALD W		1.2 NAME			
STREET ADDRESS	4106 W. CYPRESS ST.		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA, FL 00000		1.4 CITY - ST - ZIP			
TITLE	Р	DELETE	2.1 TITLE	Change	Additio	
NAME	TUCKER, NANCY L.		2.2 NAME			
STREET ADORESS	4106 W. CYPRESS STREET		2.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL		2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE	Change	Additio	
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-7IP			
TITLE		DELETE	4 1 TITLE	Change	Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP	_		4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE	☐ Change	Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	_		5.4 CITY - \$1 - ZIP			
TITLE		DLLETE	6.1 TITLE	☐ Change	Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
			I			

14. Thereby 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 annual report or suppliercental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.