2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768743

FILED Mar 22, 2005 Secretary of State

Entity Na	me: TUPELC					
Current Principal Place of Business:			siness:	New Principal Place	New Principal Place of Business:	
PO BOX [*] CRAWFC	1053 DRDVILLE, FL	32327	US			
Current Mailing Address:				New Mailing Address:		
PO BOX 1 CRAWFC	1053 PRDVILLE, FL	32327	US			
FEI Numbe	r: 59-2908557	FEI No	umber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address	Name and Address of New Registered Agent:	
LEPP, GC P. O. BOX		00000				
010/001	RDVILLE, FL	32326	US			
The above	·			purpose of changing its registere	ed office or registered agent, or both,	
The above	e named entity te of Florida			purpose of changing its registere	ed office or registered agent, or both,	
The above in the Stat	e named entity te of Florida. IRE:	submits			ed office or registered agent, or both, Date	
The above in the Stat	e named entity te of Florida. IRE:	submits	this statement for the	ent	Date	
The above in the Stat	e named entity te of Florida. IRE: Electro	onic Signa CTORS:) Delete	this statement for the ature of Registered Ag	ent		
The above in the State SIGNATU OFFICER Title: Name: Address:	e named entity te of Florida. IRE: Electro ES AND DIREC PD (CAPPS, DANN 122 TUPELO CRAWFORD	cronic Signa CTORS:) Delete NY DR. //ILLE, FL) Delete NATHON JM CT	this statement for the ature of Registered Ag	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GORDON LEPP 03/22/2005 DT