## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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TUCKER PARTNERS, INC.								2 111 10: 21	į.		
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Principal Place	of Busines	s	Mai	ling Address	· · · · · · · · · · · · · · · · · · ·	CECTED IN		<b>t</b>			
4288 LAFAYETTE ST.				4288 LAFAYETTE ST.				1 1 · · · ·			
Marianna, Fl. 32446				MARIANNA, FL 32446							
2. Principal Place of Business			3. M	3. Mailing Address							
Suite, Apt. #, etc.			S	Suite, Apt. #, etc.			01212005	Chg-P	CR2E03	4 (10/03)	
City & State			С	City & State			4. FEI Numb	er -2/- 35/	797 0		olied For Applicable
Zip	Zip Country		Z	Zlp Count		ntry	5. Certificate	of Status Desired		8.75 Add	tional
				Boolstoned & cont		· · · · · · · · · · · · · · · · · · ·		Address of New F		ee Required	<u> </u>
Name and Address of Current Registered Agent						Name	7. REDUG ERR	I MODITORS OF THOM I	infliptor on v	Bain	
TUCKER, BYRON 4288 LAFAYETTE ST.					Street Address (P.O. Box Number is Not Acceptable)						
4288 LAFA MARIANN					Street Address			or so two receptants			
					City			FL	Zip Code	,	
The above named entity submits this statement for the purpose of changing its registere							itered agent, or bo	oth, in the State of Fl	orida. I am f	amiliar with,	and accept
the obligations of registered agent.											
SIGNATURE Security and a printed name of registered approx and the ill explicable (NOTE: Registered A							med when relations		DATE		
Signature, typed or printed name of registered agent and the ill explicable. (NOTE: Registered Agent signature required when refestating)  DATE											
FILI After Ma	E NOW!!! nv 1. 200	FEE IS \$150.00 5 Fee will be \$5	50.00	9. Election Campa Trust Fund Con		ncing \$	55.00 May Be added to Fees	ii:			
10.				TORS	11,		ADOITIONS	/CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11
TITLE	OFFICERS AND DIRECTORS 11.  CDPS Dalete 111.						70011070	707741020 10 011	100,100,110	Change	Addition
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TITLE	MARIANNA, FL 32446					Ę.				☐ Change	Addition
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STREET ADDRESS						REET ADORESS					
СПҮ-5Т-ДР	<u> </u>					TY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered 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: BYRON TUCKER 2/18/05											
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## TUCKER PARTNERS, INC. 4288 Lafayette St. Marianna, FL 32448

July 25, 2005

TO:

Florida Department of State

FROM:

Tucker Partners, Inc.

Document # F04000001288

RE:

Notice of Intent to Dissolve

## Dear Sir/Madam:

We called last week to find out why we received a Notice of Intent to Dissolve. We were told because the FEIN was missing from the annual report, however, we did not received the letter your department sent sometime in May, as we were told last week.

Please find attached to this note copy of the annual report showing the FEIN missing in report dated 2/18/05, also for your records copy of the cashed check # 5999 back and front for your files.

Please correct our records.

Truly yours

Byron/Tucker President