


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F42598</b> 1. Entity Name TERCO, INC.	
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Principal Place of Business 2223 TRADE CENTER WAY NAPLES, FL 34109	Mailing Address 2223 TRADE CENTER WAY NAPLES, FL 34109
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

HUBSCHAMN, HARRISON  
101 CARILA RD  
NAPLES, FL 34108

**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.)

000000474511  
04/04/06-00026-017 150.00

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HUBSCHAMN, SAMUEL
STREET ADDRESS	2140 HAWKS RIDGE DRIVE #1703
CITY-ST-ZIP	NAPLES, FL 34105
TITLE	SD
NAME	BEYRENT, TERYL
STREET ADDRESS	5147 SEAHORSE AVE.
CITY-ST-ZIP	NAPLES, FL
TITLE	VTD
NAME	HUBSCHMAN, HARRISON
STREET ADDRESS	101 CARILA RD
CITY-ST-ZIP	NAPLES, FL 34108
TITLE	VD
NAME	HUBSCHMAN, CONNIE
STREET ADDRESS	50 DOLPHIN CIRCLE
CITY-ST-ZIP	NAPLES, FL 00000,
TITLE	VD
NAME	HUBSCHAMN, ALBERT
STREET ADDRESS	525 SOLL STREET
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:**  **3/14/06 239-566-2780**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #