

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90003 047 ***150.00

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1. Entity Name
TUPPERWARE SERVICES, INC.



Principal Place of Business
**14901 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837**

Mailing Address
**P.O. BOX 2353
ORLANDO, FL 32802**

40044600



03092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3389571	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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

**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 P
NAME GOINGS, E.V.
STREET ADDRESS 14901 S. ORANGE BLOSSOM TRAIL
CITY-ST-ZIP ORLANDO, FL 32837

TITLE VT
NAME DAVIS, EDWARD R III
STREET ADDRESS 14901 S ORANGE BLOSSOM TRAIL
CITY-ST-ZIP ORLANDO, FL 32837

TITLE VSD
NAME ROEHLK, THOMAS M
STREET ADDRESS 14901 S. ORANGE BLOSSOM TRAIL
CITY-ST-ZIP ORLANDO, FL 32837

TITLE V
NAME HALVERSEN, DAVID T
STREET ADDRESS 14901 S. ORANGE BLOSSOM TRAIL
CITY-ST-ZIP ORLANDO, FL 32837

TITLE V
NAME HAJEK, JOSEF
STREET ADDRESS 14901 S. ORANGE BLOSSOM TRAIL
CITY-ST-ZIP ORLANDO, FL 32837

TITLE AS
NAME SLAPPEY, BRYAN J
STREET ADDRESS 14901 S ORANGE BLOSSOM TR
CITY-ST-ZIP ORLANDO, FL 32837

**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: Bryan J. Slappey **Bryan J. Slappey** (407) 826-5050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Directors and Officers

Company: Tupperware Services, Inc.

Title	Last Name	First Name	M.I.	Date Elected
Directors				
	Davis, III	Edward	R	5/1/2002
	Hajek	Josef		1/24/2002
	Rochlik	Thomas	M	7/9/1996
Officers				
Assisant Secretary	Coumes	Susan		3/18/2005
V.P. & Treasurer	Davis, III	Edward	R	5/1/2002
Vice President	Garcia	Lillian	D	1/27/2000
President	Goings	E. V.		7/9/1996
Vice President	Hajek	Josef		9/3/2001
Vice President	Halversen	David	T	7/9/1996
Vice President	Hart	Christa	M	3/18/2005
VP & Controller	Kulhanek	Timothy	A	3/18/2005
Vice President	Naylor	Anne	E	1/27/2000
Sr. VP & CFO	Potesman	Michael	S	3/4/2004
Vice Pres. & Secretary	Rochlik	Thomas	M	7/9/1996
Assistant Secretary	Slappey	Bryan	J	2/6/2004

ATTACHMENT

40044605

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