

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # F97000005428

1. Entity Name

M. TUCKER ENTERPRISES INC.



FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90235 033 ***150.00

Principal Place of Business

1083 BENNETT RD
FORT PIERCE FL 34947

Mailing Address

1083 BENNETT RD
FORT PIERCE FL 34947



2. Principal Place of Business
1083 Bennett Rd

3. Mailing Address
1083 Bennett Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State
FORT PIERCE FL

City & State
FORT PIERCE FL

4. FEI Number

21-5081559

Applied For

Not Applicable

34947

Country

St Lucie

34947

Country

St Lucie

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TUCKER, MORRIS E
1083 BENNETT RD
FORT PIERCE FL 34947

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

MORRIS E Tucker

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
TUCKER, MORRIS E
1083 BENNETT RD
FORT PIERCE FL 34947 ☐ Delete

TITLE
NAME
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

MORRIS E Tucker 2-11-06 772-595-0151