

2006 FOR PROFIT CORPORATION ANNUAL REPORT

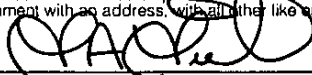
FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90264 007 ***150.00

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01102006 Chg-P CR2E034 (11/05)

DOCUMENT # H71725					
1. Entity Name TINCHER CONCRETE CONSTRUCTION, INC.					
Principal Place of Business 16900 GATOR RD FT. MYERS, FL 33912 US			Mailing Address 1500 ROYAL PALM SQ. BLVD. #102 FORT MYERS, FL 33919 US		
2. Principal Place of Business			3. Mailing Address Post Office Box 1668		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State FT. MYERS, FL		
Zip		Country		Zip 33902 Country USA	
4. FEI Number 59-2570133			Applied For Not Applicable		
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		
KAYUSA, MICHAEL F 1922 VICTORIA AVENUE SUITE A FT. MYERS, FL 33912			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 _____ 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TINCHER, JAMES D. 18660 RIVER ESTATES LANE ALVA, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1568 HILL AV. FT. MYERS, FL 33901		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TINCHER, TERRY A. 2260 FIRST ST. #206 FORT MYERS, FL 33901 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST TINCHER, RALPH A 18991 SERENOA COURT ALVA, FL 33920 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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: 		TERRY TINCHER		1-10-06 239-790-2023	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	