

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # H95225

1. Entity Name
THE GEORGE W. LACKEY CO.



Principal Place of Business

3438 COLWELL AVE
TAMPA, FL 33614 US

Mailing Address

3438 COLWELL AVE
TAMPA, FL 33614 US

FILED
Feb 07, 2005 08:00 AM
Secretary of State



01042005 No Chg-P CH2E034 (10/03)

4. FEI Number
59-2629217

Applied For
Not Applicable

5. Certificate of Status Desires ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LACKEY, GEORGE W.
3438 COLWELL AVE
TAMPA, FL 33614

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, and is familiar with and accepts the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000218710
02/07/05-80075-012 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTS LACKEY, GEORGE W. 3438 COLWELL AVE TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George W. Lackey

Date

2/4/05

913-865-1190

Signature Phone #