

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J76332

FILED  
Apr 08, 2011  
Secretary of State

Entity Name: CHUCK'S CONKLIN CO., INC.

**Current Principal Place of Business:**

9050 BROOKER DR  
NEW PORT RICHEY, FL 34655 US

**New Principal Place of Business:**

**Current Mailing Address:**

9050 BROOKER DR  
NEW PORT RICHEY, FL 34655 US

**New Mailing Address:**

FEI Number: 59-2819331

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONKLIN, CHARLES  
9050 BROOKER DR  
NEW PORT RICHEY, FL 34655 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: CONKLIN, CHARLES  
Address: 9050 BROOKER DR  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D  
Name: CONKLIN, CHARLES  
Address: 9050 BROOKER DR  
City-St-Zip: NEW PORT RICHEY, FL 34655

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES CONKLIN

D

04/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date