

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L35751	
1. Entity Name TUTTLE HOMES, INC.	

Principal Place of Business P.O. BOX 864 P. O. BOX 864 MARCO ISLAND FL 34146 US	Mailing Address % WILLIAM G. MORRIS, ESQ. P. O. BOX 864 MARCO ISLAND FL 34146 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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1st MOORE CR2E034 (10/06)

4. FEI Number 65-0164471	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MORRIS, WILLIAM G., ESQ. 247 N. COLLIER BLVD. #202 MARCO ISLAND FL 33937
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7. Name and Address of New Registered Agent 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 - applicable (NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
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TITLE NAME STREET ADDRESS CITY, ST, ZIP	D TUTTLE, LEE 1201 MARLIN COURT MARCO ISLAND FL ☐ Delete
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TITLE NAME STREET ADDRESS CITY, ST, ZIP	D TUTTLE, ARLINE 1201 MARLIN COURT MARCO ISLAND FL ☐ Delete
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TITLE NAME STREET ADDRESS CITY, ST, ZIP	VP KURYLAK, MICHAEL E 1481 19TH ST. SW NAPLES FL 34117 ☐ Delete
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TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
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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.
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SIGNATURE: <u>Lee W. Tuttle Jr</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE: <u>JAN 19 2007</u> Date	DAYTIME PHONE: <u>(239) 825 5343</u> Daytime Phone #
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