

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 08, 2005 08:00 AM
Secretary of State

DOCUMENT # M82601

1. Entity Name
HOUCK ENTERPRISES, INC.



Principal Place of Business
**117 HARBOR DRIVE
P.O. BOX 536
OZONA, FL 34660 US**

Mailing Address
**1598 SPOTTSWOOD DRIVE
PALM HARBOR, FL 34683 US**



06012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2892523

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HOUCK, JEFFREY
1598 SPOTTSWOOD CIR
PALM HARBOR, FL 34683**

**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. 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
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PDST
NAME	HOUCK, LOIS E
STREET ADDRESS	117 HARBOR DR.
CITY-ST-ZIP	OZONA, FL 34660
TITLE	VD
NAME	HOUCK, JEFFERY C
STREET ADDRESS	1598 SPOTTSWOOD CIRCLE
CITY-ST-ZIP	PALM HARBOR, FL 34683
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1000000369141
06/08/05-80001-013 150.00

**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)(c), 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

Jeffrey C Houch
JEFFREY C HOUCK

5-31-05 727-787-2977

Date

Daytime Phone #