

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Sep 05, 2007  
Secretary of State**

DOCUMENT# N04000008778

Entity Name: TUCKERENTERPRISE YOUTH FOUNDATION INC.

**Current Principal Place of Business:**

190 DOUGLAS RD  
OLDSMAR, FL 34677

**New Principal Place of Business:**

355 TAVERNIER CIR  
OLDSMAR, FL 34677

**Current Mailing Address:**

POST OFFICE BOX 221  
OLDSMAR, FL 34677

**New Mailing Address:**

FEI Number: 41-2151357      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

TUCKER, LJ  
190 DOUGLAS RD  
OLDSMAR, FL 34677      US

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:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TUCKER, LJ  
Address: 190 DOUGLAS RD  
City-St-Zip: OLDSMAR, FL 34677 NP

Title: P (X) Change ( ) Addition  
Name: TUCKER, LJ  
Address: 355 TAVERNEIR CIR  
City-St-Zip: OLDSMAR, FL 34677 NP

Title: D ( ) Delete  
Name: MCCRAY, FELICIA  
Address: 190 DOUGLAS RD  
City-St-Zip: OLDSMAR, FL 34677 NP

Title: D (X) Change ( ) Addition  
Name: MCCRAY, FELICIA  
Address: 355 TAVERNIER CIR  
City-St-Zip: OLDSMAR, FL 34677 NP

Title: D ( ) Delete  
Name: PASSMORE, ASHLIE D  
Address: 190 DOUGLAS RD  
City-St-Zip: OLDSMAR, FL 34677 NP

Title: D (X) Change ( ) Addition  
Name: PASSMORE, ASHLIE D  
Address: 355 TAVERNIER CIR  
City-St-Zip: OLDSMAR, FL 34677 NP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LJ TUCKER

P

09/05/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date