

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 30, 2008
Secretary of State**

DOCUMENT# N04000008778

Entity Name: TUCKERENTERPRISE YOUTH FOUNDATION INC.

Current Principal Place of Business:

355 TAVERNIER CIR
OLDSMAR, FL 34677

New Principal Place of Business:

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:

TUCKER, LJ
190 DOUGLAS RD
OLDSMAR, FL 34677 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: P () Delete
Name: TUCKER, LJ
Address: 355 TAVERNEIR CIR
City-St-Zip: OLDSMAR, FL 34677 NP

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

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

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BEVERLAND, JERRY F-MAYOR
Address: 355 TAVERNIER CIR
City-St-Zip: OLDSMAR, FL 34677 NP

Title: D () Change (X) Addition
Name: RAMSEY, NATHIEL PASTOR
Address: 355 TAVERNIER CIR
City-St-Zip: OLDSMAR, FL 34677

Title: D () Change (X) Addition
Name: CARNEY, CONFERLETE DR.
Address: 355 TAVERNIER
City-St-Zip: OLDSMAR, FL 34677

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

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

05/30/2008

Electronic Signature of Signing Officer or Director

_____ Date