


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000014269					
1. Entity Name CURE-IT, INC.					
Principal Place of Business 8600 FRONT BEACH RD. PANAMA CITY BEACH FL 32407			Mailing Address 8600 FRONT BEACH RD. PANAMA CITY BEACH FL 32407		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3632405 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applied	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				1st MOORE CR2E034 (10/05)	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
TUCKER, JAMES L 8600 W. HWY. 98 PANAMA CITY BEACH FL 32407				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 agree, the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when remaining) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution. <input type="checkbox"/>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add	
NAME	TUCKER, JAMES L		NAME		
STREET ADDRESS	8600 FRONT BEACH RD.		STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add	
NAME	TUCKER, BRENDA D		NAME		
STREET ADDRESS	8600 FRONT BEACH RD.		STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407		CITY-ST-ZIP		
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CITY-ST-ZIP	PANAMA CITY BEACH FL 32407		CITY-ST-ZIP		
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		



1st MOORE CR2E034 (10/05)

4. FEI Number **59-3632405** ☐ Applied For
☐ Not Applied

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

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

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FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
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9. Election Campaign Financing **\$5.00 May Be Added to Fees**
 Trust Fund Contribution. ☐

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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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.

SIGNATURE: James L Tucker 1-19-06 850-234-3893