


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 21, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P0000055551  
 1. Entity Name  
 TRED AVON CORP.



Principal Place of Business \_\_\_\_\_ Mailing Address \_\_\_\_\_  
 906 HEMINGWAY CIR 906 HEMINGWAY CIR  
 TAMPA, FL 33602 TAMPA, FL 33602

**DO NOT WRITE IN THIS SPACE**



01052005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3672484 Applied For Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 STERNS, RANDY K  
 220 S. FRANKLIN STREET  
 TAMPA, FL 33602

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHUCK, BRUCE 906 HEMINGWAY CIRCLE TAMPA, FL 33602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTS SCHULK, MARGERY 906 HEMINGWAY CIRCLE TAMPA, FL 33602
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U00000187843  
 01/24/05-60029-019 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Bruce R. Schuck BRUCE R. SCHUCK - PRESIDENT 1/17/05 813-224-0446  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #