

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT# P01000052689	
1. Entity Name TACK/PLUS, INC.	

Principal Place of Business 20392 BOGGY LANE SEMINOLE, AL 36574	Mailing Address 20392 BOGGY LANE SEMINOLE, AL 36574
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04012004 NoChg-P CR2E034(10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BALL, BRADEN K JR
SHELL, FLEMING, DAVIS & MENGE
226 PALAFOX PLACE, NINTH FLOOR-SEVILLE TOWE
PENSACOLA, FL 32501

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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 _____ (NOTE Registered Agent's signature required where installing) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000118156 04/19/04-80048-009 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WILLIAMS, MARK A 20392 BOGGY LANE SEMINOLE, AL 36574
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S WILLIAMS, JULIA H 20392 BOGGY LANE SEMINOLE, AL 36574
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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)(i), 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  4/19/04 251-946-2358

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____