

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000073100

1. Entity Name
**BUCCANEERS SHEET METAL & EQUIPMENT
FABRICATORS, INC.**



Principal Place of Business
**3074 CHITTY RD.
PLANT CITY, FL 33565**

Mailing Address
**3074 CHITTY RD.
PLANT CITY, FL 33565**



04272005 No Chg-P CR2ED04 (10/03)

4. FEI Number
58-3735937

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**FULTON, RICHARD
3074 CHITTY RD.
PLANT CITY, FL 33565**

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

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

000000347825
04/30/05-80132-017.150.00

**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	P
NAME	FULTON, RICHARD
STREET ADDRESS	3074 CHITTY RD
CITY-ST-ZIP	PLANT CITY, FL 33565
TITLE	VP
NAME	BARKER, MARION E
STREET ADDRESS	3106 CHITTY RD.
CITY-ST-ZIP	PLANT CITY, FL 33565
TITLE	ST
NAME	FULTON, MARIE D
STREET ADDRESS	3074 CHITTY RD
CITY-ST-ZIP	PLANT CITY, FL 33565
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/05 813 628 6160

Date

Display Phone #