


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90186 014 ***150.00

DOCUMENT # P01000107207 1. Entity Name T. MICHAEL TUCKER, C.P.A., P.A.	
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Principal Place of Business 16700 S PEAR STREET BLOUNTSTOWN, FL 32424	Mailing Address P O BOX 555 BLOUNTSTOWN, FL 32424
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44047457



DO NOT WRITE IN THIS SPACE

07012004 No Chg-P CR2E034 (10/03)

4. FEI Number 27-0000517	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent TUCKER, T MICHAEL 16700 S PEAR STREET BLOUNTSTOWN, FL 32424	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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	P TUCKER, T. MICHAEL 20233 SW SHEARY AVE BLOUNTSTOWN, FL 32424
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**DO NOT WRITE
IN THIS SPACE**

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: Michael Tucker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/04 850/674-4531
Date Daytime Phone #

Attachment
44047437

T. MICHAEL TUCKER, CPA, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

POST OFFICE BOX 555

BLOUNTSTOWN, FLORIDA 32424

16700 SOUTH PEAR STREET

TELEPHONE
(850) 674-4531

TELECOPIER
(850) 674-3388

July 1, 2004

Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314-6198

Dear Sir/Madam:

RE: T. Michael Tucker, C.P.A., P.A.
27-0000517
Document No. P01000107207

Enclosed check for \$150.00 for annual corporation fee. This is our first year filing an annual report, and we did not receive the report, however, we just received a Notice of Intent to Dissolve if appropriate fee is not paid by September 8, 2004.

Due to the above communication error, please remove the \$400.00 penalty.

Very truly yours,



T. Michael Tucker