

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90291 011 ***150.00

DOCUMENT # P02000087515

1. Entity Name

MOORE ENTERPRISES OF POLK COUNTY, INC.



Principal Place of Business

5762 GRANITE LANE
LAKELAND FL 33809

Mailing Address

5762 GRANITE LANE
LAKELAND FL 33809

2. Principal Place of Business

7102 Estate Road
Suite, Apt. #, etc.

3. Mailing Address

7102 Estate Rd.
Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

LAKELAND, FLA.

City & State

LAKELAND, FLA.

4. FEI Number

75-3078106

Applied For

Not Applicable

Zip

33809

Country

USA

Zip

33809

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOORE, BETH A
5762 GRANITE LANE
LAKELAND FL 33809

7. Name and Address of New Registered Agent

Name: Beth A. Moore
Street Address (P.O. Box Number is Not Acceptable):
7102 Estate Road
City: LAKE LAND FL Zip Code: 33809

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

Beth A. Moore Director

4-15-05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	MOORE, GEORGE R III	
STREET ADDRESS	5762 GRANITE LANE	
CITY-ST-ZIP	LAKELAND FL 33809	
TITLE	D	<input type="checkbox"/> Delete
NAME	MOORE, BETH A	
STREET ADDRESS	5762 GRANITE LANE	
CITY-ST-ZIP	LAKELAND FL 33809	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, George R III	
STREET ADDRESS	7102 Estate Road	
CITY-ST-ZIP	LAKELAND, FLA. 33809	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, Beth A	
STREET ADDRESS	7102 Estate Rd.	
CITY-ST-ZIP	LAKELAND, FLA. 33809	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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)(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:

Beth A. Moore Beth A. Moore

4-14-05

863-688-1226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #