## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000102504

Entity Name: VINCENT ARCURI, INC

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1022 LAND O LAKES BLVD 1022 LAND O' LAKES BOULEVARD

LUTZ, FL 33549 LUTZ, FL 33549

Current Mailing Address: New Mailing Address:

PO BOX 23763 PO BOX 23763

TAMPA, FL 33623 C/O LAW OFFICES BETSY L. MCCOY PA

TAMPA, FL 33623

FEI Number: 59-3218121 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCCOY BENEDICT, BETSY
3702 WEST KENNEDY BLVD

MCCOY, BETSY
3702 WEST KENNEDY BLVD

TAMPA, FL 33609 US TAMPA, FL 33609 US

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.

SIGNATURE: BETSY L. MCCOY 04/30/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT ( ) Delete Title: P/T (X) Change ( ) Addition

Name: ARCURI, VINCENT Name: ARCURI, VINCENT
Address: 1022 LAND O LAKES BLVD Address: 1022 LAND O LAKES BOULEVARD

City-St-Zip: LUTZ, FL 33549 City-St-Zip: LUTZ, FL 33549

(ty-5t-2ip. 2012, 12 33549 ) (ity-5t-2ip. 2012, 12 33549)

Title: S (X) Delete Title: ( ) Change ( ) Addition
Name: MCCOY BFTSY I Name:

 Name:
 MCCOY, BETSY L
 Name:

 Address:
 3702 W KENNEDY BLVD
 Address:

 City-St-Zip:
 TAMPA, FL 33609
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VINCENT ARCURI P/T 04/30/2005