

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
Feb 04, 2005 08:00 AM  
Secretary of State

**DOCUMENT # P03000106030**  
1. Entity Name  
TREASURE COAST SENIOR TOUR, INC.



Principal Place of Business  
9311 SW EAGLES LANDING  
STUART, FL 34997

Mailing Address  
9311 SW EAGLES LANDING  
STUART, FL 34997

**DO NOT WRITE IN THIS SPACE**



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number  
14-1895810 Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
KRAMER, ROBERT S  
853 SE MONTEREY COMMONS BLVD  
STUART, FL 34996

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IN THIS SPACE**

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 signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**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 NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, ROGER 9407 SW EAGLES LANDING STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, JOYCE 9407 SW EAGLES LANDING STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TUCKER, JERRY 9311 SW EAGLES LANDING STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TUCKER, SUSAN 9311 SW EAGLES LANDING STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000214930  
02/04/05-80032-014 150.00

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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: Jerry Tucker 2/1/05 (772) 288-3234  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #