

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90064 025 ***163.75

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1. Entity Name
USA STORE CO.



Principal Place of Business
**1422 N ROCK SPRINGS RD
APOPKA, FL 32712**

Mailing Address
**1422 N ROCK SPRINGS RD
APOPKA, FL 32712**



01242006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**TAITT-WRIGLEY, YVONNE M
1422 N ROCK SPRINGS RD
APOPKA, FL 32712**

**DO NOT WRITE
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

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME TAITT-WRIGLEY, YVONNE M PD
STREET ADDRESS 1422 N ROCK SPRINGS RD
CITY-ST-ZIP APOPKA, FL 32712

TITLE PD
NAME TAITT-WRIGLEY, YVONNE M PD
STREET ADDRESS 1422 N ROCK SPRINGS RD.
CITY-ST-ZIP APOPKA, FL 32712

TITLE PD
NAME TAITT-WRIGLEY, YVONNE M. PD
STREET ADDRESS 1422 N ROCK SPRINGS RD.
CITY-ST-ZIP APOPKA FL 32712

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Yvonne M Taitt Wrigley* **YVONNE M TAITT WRIGLEY** 2/9/06 407 886 5767

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #