## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000031101

Entity Name: TR POOLER INC.

FILED Apr 19, 2005 Secretary of State

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

12024 TUSCANY BAY DR #303 8218 SOLANO BAY LOOP TAMPA, FL 33626

624

TAMPA, FL 33635

**Current Mailing Address: New Mailing Address:** 

12024 TUSCANY BAY DR #303 8218 SOLANO BAY LOOP TAMPA, FL 33626

624 TAMPA, FL 33635

FEI Number: 20-2699797 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:

POOLER, TOM 12024 TUSCANY BAY DR #303 TAMPA, FL 33626

POOLER, TOM 8218 SOLANO BAY LOOP 624 TAMPA, FL 33635 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: 04/19/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title:

POOLER, TOM POOLER, TOM Name: Name: Address:

12024 TUSCANY BAY DR #303 Address: 8218 SOLANO BAY LOOP #624

City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33635

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 Statutés. 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.

Ρ SIGNATURE: TOM POOLER 04/19/2005