

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90401 031 ***150.00

DOCUMENT # P04000055624

1. Entity Name

TREASURE COAST INVESTORS INC.



Principal Place of Business

3386 SE GRAN PARKWAY 2 WORDS
STUART FL 34997-8859

Mailing Address

2172 SW RACQUET CLUB DR
PALM CITY FL 34990-2313



2. Principal Place of Business

3. Mailing Address

3386 SE GRAN PARK WAY

Suite, Apt. #, etc.

STUART COMMERCE PARK

City & State

STUART, FL

Zip
34997-8859

Country
US

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

51-0504180

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRADY, RACHELLE R
2172 SW RACQUET CLUB DR
PALM CITY FL 34990-2313

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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 PD ☐ Delete
NAME THOMAS, JAMES P
STREET ADDRESS 5155 SW HAMMOCK CR DR
CITY-ST-ZIP PALM CITY FL 34990

TITLE VD ☐ Delete
NAME GRADY, HENRY A
STREET ADDRESS 2172 SW RACQUET CLUB DR
CITY-ST-ZIP PALM CITY FL 34990-2313

TITLE SD ☐ Delete
NAME THOMAS, DEREDA M
STREET ADDRESS 5155 SW HAMMOCK CR DR
CITY-ST-ZIP PALM CITY FL 34990

TITLE TD ☐ Delete
NAME GRADY, RACHELLE R
STREET ADDRESS 2172 SW RACQUET CLUB DR
CITY-ST-ZIP PALM CITY FL 34990-2313

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Rachelle R Grady RACHELLE GRADY 3/24/06 (772) 781-8627
Director/Treasurer