

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90234 011 ***150.00

DOCUMENT # P04000105946

1. Entity Name

TUFF GIRLS, INC.



Principal Place of Business

14970 CAPTIVA DR.
CAPTIVA FL 33924
US

Mailing Address

PO BOX 459
CAPTIVA FL 33924
US



2. Principal Place of Business - No P.O. Box #

751 TARPON BAY ROAD

Suite, Apt. #, etc.

3. Mailing Address

PO BOX 147

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

SANIBEL, FL

City & State

SANIBEL, FL

4. FEI Number

46-8013147

Applied For

Not Applicable

Zip

33957

Country

LEE

Zip

33957

Country

LEE

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEVINE, GAYE
9405 BEVERLY LN
SANIBEL FL 33957

7. Name and Address of New Registered Agent

Name

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

SAME

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 - applicable.

(NOTE: Registered Agent signature required when reinstating)

2/10/07

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 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	P	<input checked="" type="checkbox"/> Delete
NAME	STONE, BRIDGET	
STREET ADDRESS	9405 BEVERLY LN	
CITY - ST - ZIP	SANIBEL FL 33957	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LEVINE, GAYE	
STREET ADDRESS	9405 BEVERLY LN	
CITY - ST - ZIP	SANIBEL FL 33957	
TITLE	SEC	<input checked="" type="checkbox"/> Delete
NAME	STONE, BRIDGET	
STREET ADDRESS	9405 BEVERLY LN	
CITY - ST - ZIP	SANIBEL FL 33957	
TITLE	TR	<input type="checkbox"/> Delete
NAME	LEVINE, GAYE	
STREET ADDRESS	9405 BEVERLY LN	
CITY - ST - ZIP	SANIBEL FL 33957	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAYE LEVINE	
STREET ADDRESS	9405 BEVERLY LANE	
CITY - ST - ZIP	SANIBEL, FL. 33957	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAYE LEVINE	
STREET ADDRESS	9405 BEVERLY LANE	
CITY - ST - ZIP	SANIBEL, FL. 33957	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

2/10/07

2394721956

Date

Daytime Phone #