

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000143337

FILED
Apr 29, 2005
Secretary of State

Entity Name: TUCKLER CONSTRUCTION, INC

Current Principal Place of Business:

1539 ELMWOOD AVE
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

PO BOX 452195
KISSIMMEE, FL 34745

New Mailing Address:

FEI Number: 20-1758406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUCKLER, IVONNE
1539 ELMWOOD AVE
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TUCKLER, IVONNE
Address: PO BOX 452195
City-St-Zip: KISSIMMEE, FL 34759

Title: D () Delete
Name: PADILLA, GREGORIO J
Address: PO BOX 452195
City-St-Zip: KISSIMMEE, FL 34759

Title: D (X) Delete
Name: BERGE, JUAN A
Address: PO BOX 452195
City-St-Zip: KISSIMMEE, FL 34745

Title: D (X) Delete
Name: CONCEPCION, SAMUEL J
Address: PO BOX 452195
City-St-Zip: KISSIMMEE, FL 34745

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Statutes. 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.

SIGNATURE: IVONNE TUCKLER

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date