

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000143864

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** TENICO CONSTRUCTION CORP

**Current Principal Place of Business:**

611 NW 117 CT  
OCALA, FL 34482

**New Principal Place of Business:**

3 BAHIA PASS PLACE  
OCALA, FL 34472

**Current Mailing Address:**

P O BOX 832144  
OCALA, FL 34483

**New Mailing Address:**

**FEI Number:** 20-1775057

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHARLEMAGNE, FELIX R  
611 NW 117 CT  
OCALA, FL 34482 US

**Name and Address of New Registered Agent:**

CHARLEMAGNE, FELIX R  
3 BAHIA PASS PLACE  
OCALA, FL 34472 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: FELIX R CHARLEMAGNE

04/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PCEO  
Name: CHARLEMAGNE, FELIX R  
Address: 3 BAHIA PASS PLACE  
City-St-Zip: Ocala, FL 34472

Title: S, T  
Name: CHARLEMAGNE, DAWN  
Address: 3 BAHIA PASS PLACE  
City-St-Zip: Ocala, FL 34472

Title: VP  
Name: CHARLEMAGNE, MARCELLUS  
Address: 3 BAHIA PASS PLACE  
City-St-Zip: Ocala, FL 34472

Title: VP  
Name: CHARLEMAGNE, ALBERT  
Address: 3 BAHIA PASS PLACE  
City-St-Zip: Ocala, FL 34472

I hereby 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 all other like empowered.

SIGNATURE: FELIX R CHARLEMAGNE

PCEO

04/26/2011

Electronic Signature of Signing Officer or Director

Date