

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000031214

Entity Name: TRI-PEC INC.

FILED
Mar 16, 2006
Secretary of State

Current Principal Place of Business:

1615 PINECREST DRIVE
ORANGE PARK, FL 32003

New Principal Place of Business:

1615 PINECREST DRIVE
ORANGE PARK, FL 32003 US

Current Mailing Address:

1615 PINECREST DRIVE
ORANGE PARK, FL 32003

New Mailing Address:

1615 PINECREST DRIVE
ORANGE PARK, DE 32003 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

DENTNESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: BUSINESS FILINGS INCORPORATED
Electronic Signature of Registered Agent

03/16/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PETRELLI, WILL
Address: 1615 PINECREST DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: SD () Delete
Name: CARTER, CLEVE
Address: 156 GAIL CT
City-St-Zip: ORANGE PARK, FL 32073

Title: VD () Delete
Name: ELLISON, DAVE
Address: 491 INDEPENDENCE RD
City-St-Zip: ALIQUIPPA, PA 15001

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PETRELLI, WILL
Address: 1615 PINECREST DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: T (X) Change () Addition
Name: PETRELLI, WILL
Address: 1615 PINECREST DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: D (X) Change () Addition
Name: PETRELLI, WILL
Address: 1615 PINECREST DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: V () Change (X) Addition
Name: ELLISON, DAVE
Address: 491 INDEPENDENCE RD
City-St-Zip: ALIQUIPPA, PA 15001

Title: D () Change (X) Addition
Name: ELLISON, DAVE
Address: 491 INDEPENDENCE RD
City-St-Zip: ALIQUIPPA, PA 15001

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: WILLIAM J. PETRELLI
Electronic Signature of Signing Officer or Director

PRES

03/16/2006

Date