

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2006 8:00 am**  
**Secretary of State**

03-08-2006 90173 038 \*\*\*150.00

<b>DOCUMENT # P05000133085</b> 1. Entity Name <b>TECTONICS, INC.</b>					
Principal Place of Business <b>6425 28TH AVE. E. BRADENTON, FL 34208</b>			Mailing Address <b>6425 28TH AVE. E. BRADENTON, FL 34208</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>20-3564013</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>WILCOX, DAVID W 308 13TH ST. W. BRADENTON, FL 34205</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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: _____ (NOTE: Registered Agent signature required when reappointing) DATE: _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,D <b>TOOMEY, LORIAN M 6425 28TH AVE. E. BRADENTON, FL 34208</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDC <b>TOOMEY, JAMES K 6425 28TH AVE. E. BRADENTON, FL 34208</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP,D <b>TOOMEY, MICHAEL O 6425 28TH AVE. E. BRADENTON, FL 34208</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T,D <b>TOOMEY, HEIDI M 6425 28TH AVE. E. BRADENTON, FL 34208</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>WILCOX, DAVID W 308 13TH ST. W. BRADENTON, FL 34205</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <b>2/27/06</b>		Daytime Phone: <b>941-745-4646</b>	

66006994



02202006 Chg-P CR2E034 (11/05)



ATTACHMENT

66006994

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 10, 2006

TECTONICS, INC.  
6425 28TH AVE. E.  
BRADENTON, FL 34208

Subject: TECTONICS, INC.

Reference Number: P05000133085

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH  
ANNUAL REPORTS SECTION

ATTACHMENT

66006994  
#PO5000133085

CL#338022006 . . .

**IMPORTANT TAX NOTICE**

Pay \$150.00 Before 3/15/06

Make check payable to:

FL DEPT OF STATE - DIV OF CORP  
UNIFORM BUSINESS REPORT FILING  
P.O. BOX 6198  
TALLAHASSEE, FL 32314

**BE SURE TO SIGN REPORT**

This return is for CORP ANNUAL REPORT - FL

TECTONICS, INC  
JAMES TOOMEY, PRESIDENT  
6425 28TH AVE E  
BRADENTON, FL 34208-6409

REINEMEYER & REINEMEYER, P.A.  
CERTIFIED PUBLIC ACCOUNTANTS  
2550 26th Street West, Bradenton, Florida 34205  
941/753-3163

Check No. \_\_\_\_\_ Date Paid \_\_\_\_\_

## ATTACHMENT

SB M

Department of the Treasury  
Internal Revenue ServiceP O BOX 249  
MEMPHIS TN

38101-0249

Date of this notice: DEC. 26, 2005  
Taxpayer Identifying Number: 20-3564013  
Form: Tax Period:For assistance you may  
call us at:

1-800-829-0115

009844.255669.0037.001 1 AT 0.292 370

TECTONICS INC  
6425 28TH AVE E  
BRADENTON FL 34208-6409257

009844

## NOTICE OF ACCEPTANCE AS AN S CORPORATION

WE HAVE ACCEPTED YOUR ELECTION TO BE TREATED AS AN S CORPORATION WITH AN ACCOUNTING PERIOD OF DECEMBER BEGINNING SEP. 28, 2005.

WE WOULD ALSO LIKE TO TAKE THIS OPPORTUNITY TO INFORM YOU OF YOUR TAX OBLIGATIONS RELATED TO THE PAYMENT OF COMPENSATION TO SHAREHOLDER-EMPLOYEES OF S CORPORATIONS.

WHEN A SHAREHOLDER-EMPLOYEE OF AN S CORPORATION PROVIDES SERVICES TO THE S CORPORATION, REASONABLE COMPENSATION GENERALLY NEEDS TO BE PAID. THIS COMPENSATION IS SUBJECT TO EMPLOYMENT TAXES.

TAX PRACTITIONERS AND SUBCHAPTER S SHAREHOLDERS NEED TO BE AWARE THAT REVENUE RULING 74-44 STATES THAT THE INTERNAL REVENUE SERVICE (IRS) WILL RE-CHARACTERIZE SMALL BUSINESS CORPORATION DIVIDENDS PAID TO SHAREHOLDERS AS SALARY WHEN SUCH DIVIDENDS ARE PAID TO THE SHAREHOLDERS IN LIEU OF REASONABLE COMPENSATION FOR SERVICES.

THE IRS MAY ALSO RE-CHARACTERIZE DISTRIBUTIONS OTHER THAN DIVIDEND DISTRIBUTIONS AS SALARY. THIS POSITION HAS BEEN SUPPORTED IN SEVERAL RECENT COURT DECISIONS.

IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE OR THE ACTION WE HAVE TAKEN, PLEASE CALL US AT THE TELEPHONE NUMBER LISTED ABOVE. IF YOU PREFER, YOU MAY WRITE TO US AT THE ADDRESS SHOWN AT THE TOP OF THIS NOTICE. IF YOU WRITE TO US, PLEASE PROVIDE YOUR TELEPHONE NUMBER AND THE MOST CONVENIENT TIME FOR US TO CALL SO WE CAN RESOLVE YOUR INQUIRY. PLEASE RETURN THE BOTTOM PART OF THIS NOTICE TO HELP US IDENTIFY YOUR CASE.

RETURN THIS PART TO US WITH YOUR CHECK OR INQUIRY  
YOUR TELEPHONE NUMBER BEST TIME TO CALL  
( )

200550

29953-742-05001-5

INTERNAL REVENUE SERVICE

P O BOX 249

MEMPHIS TN

38101-0249

TECTONICS INC

6425 28TH AVE E

BRADENTON FL

34208-6409257



203564013 WT

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