

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**
95 MAR 28 AM 11:25

DOCUMENT # P92000012639 (0)

1. Corporation Name

TUTEN CONTRACTING & DESIGNS, INC.

Principal Place of Business

**2457 SW 18 COURT
OKEECHOBEE FL 34974
US**

Mailing Address

**2457 SW 18 COURT
OKEECHOBEE FL 34974
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/14/1992

3a. Date of Last Report

01/20/1994

4. FEI Number

65-0372367

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$9.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

City, Apt. #, etc.

22

City & State

Zip

Country

25

2a. Mailing Address

26

City, Apt. #, etc.

27

City & State

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**JETZGER, URSULA
509 S.W. 2 AVE.
OKEECHOBEE FL 34974**

10. Name and Address of New Registered Agent

81. Name

MARY ANN TUTEN

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

2457 S. W. 18 COURT

83.

84. City

OKEECHOBEE

FL

85. Zip Code

34974

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **MARY ANN TUTEN, PRESIDENT**

(Signature must be printed name of registered agent and title if applicable)

(NOTE: Registered agent signature required when registering)

(DATE) **3/25/95**

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY, ST, ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY, ST, ZIP

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY, ST, ZIP

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary Ann Tuten
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR
MARY ANN TUTEN, PRESIDENT

02/13/95 (813) 467-2870