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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300001500

1. Corporation Name

NATUCK ENTERPRISES, INC.

Principal Place of Business	Mailing Address	
11291- PARK BLVD.	11291 PARK BOULEVARD	
SEMINOLE FL 33772	SEMINOLE FL 33772	

FILED Jan 21, 1999 8:00am **Secretary of State** 01-21-1999 90010 014 ***150.00



Principal Place of Business Mailing Address				+ 10031000 HW 10100 #1111 WASH WA	in as ni as ni a	8181 88 1 11	AL Ba lle Ba ll 1 00 2			
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11291 PARK B Seminole Fl		11291 PARK BOULEVARD SEMINOLE FL 33772								
US US					DO NOT WRITE IN THIS SPACE					
					}	 Date Incorporated or Qualified 12/31/1992 				}
Principal Place of Business 2a. Mailing Address				4. FEI Number		$\neg \neg \neg \land$	Applied For	٦ ۽		
21	21 26					59-3162368		.	Not Applicable	18
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5, Certifcate of Status Desired \$8.75 Additional Fee Required					
City & Stat	te	City & State				6. Election Campaign Financing		\$5.00	0 May Be	1
23		28			Trust Fund Contribution			d to Fees		
Zip	Country	Zip	Cou	ntry		8. This corporation owes the curr	ent year Inta	ngible		1
24	25	29	30			Personal Property Tax.	-	Yes	□No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	Registered A	gent]
	##/ V		}	81 Na	me]
	STRA, PETER T		}	82 Str	ont Addros	s (P.O. Box Number is Not Accepta	ublo)			4
8640 SEMINOLE BLVD				02 Str	eet Addres	o (F.O. DOX NUMBER IS NOT ACCEPTA	inie)		to refug Secretor	
SEM	IINOLE FL 34642			83		्रिकार के देखें के स्टिक्ट के किए के किए के किए के किए के किए के किए	1. \$4. (£) · }	18 70 14	1 7511 2311 1351	1
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ļ				84 Cit	у		FL	85 Zip	Code	
.11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the ab	ove-nan	ned corpora	ation submits this statement for the	purpose of o	changing it	ts registered	1
office or i	registered agent, or both, in the State of am familiar with, and accept the obligation	f Flo⊓da. Such change was aut	thorized	by the c	orporation'	s board of directors, I hereby accep	of the appoin	tment as r	egistered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: E	Panistored	A cont ciona	ture required w	hen reinstating)	DATE			ĺ.
12.	OFFICERS AND		13.	Agent signa	ule required w	ADDITIONS/CHANGES TO OF		DIRECT	ORS IN 12	1 3
TITLE	D	DELETE	1.1 TIT	ı F	-1	ADDITIONS/CHANGES TO OF	FICERS AN	[] Change		13
NAME	NATUCK, JILL D		1.2 NA		ł					
STREET ADDRESS	44004 0404 0440			VIC REET ADDR	Ecc					8
	SEMINOLE FL				L33	•] {
CITY-ST-ZIP	D D	☐ DELETE	2.1 TITI	Y-ST-ZIP				Change	Addition	1 8
Į	-							Ondings		
NAME	NATUCK, KAREN L		2.2 NA							1
STREET ADDRESS	11291 PARK BLVD			REET ADDR	ESS					
CITY-ST-ZIP	SEMINOLE FL			Y-ST-ZIP		J- 0.2-			T Addition	-
TITLE	D. C. BODEST M				I			Charge	Addition	
NAME	NATUCK, ROBERT M	DELETE	3.1 TIT			J. U.S.		Change	_	
STREET ADDRESS	AAAA BABIA OLUB	DELETE	3.2 NA	ME		J. 04-		Change	_	
(*************************************	.1129 PARK BLVD	DELETE	3.2 NAJ 3.3 STF	ME REET ADDR	ESS		ngr ig.	Change		
CITY-ST-ZIP	1129 PARK BLVD SEMINOLE FL		3.2 NAI 3.3 STF 3.4. CIT	ME REET ADDR IY-ST-ZIP	ESS		1181 (g.			
TITLE		☐ DELETE	3.2 NAI 3.3 STF 3.4, CIT 4.1 TITI	ME REET ADDR IY-ST-ZIP LE	Ess		1131 121		Addition	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: