2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000001500

Entity Name: NATUCK ENTERPRISES, INC.

FILED Jan 13, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
11291 PAF SEMINOLI	RK BLVD. E, FL 33772	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	RK BOULEVA E, FL 33772	RD US			
FEI Number	: 59-3162368	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address of	New Registered Agent:	
HOFSTRA, PETER T 8640 SEMINOLE BLVD SEMINOLE, FL 34642 US			HOFSTRA, PETER T 8640 SEMINOLE BLVD SEMINOLE, FL 32772	8640 SEMÍNOLE BLVD	
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				01/13/2006	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D (HUETT, JILL E 11291 PARK E SEMINOLE, F	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (NATUCK, KAR 11291 PARK E SEMINOLE, F	BLVD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (NATUCK, ROE 1129 PARK BI SEMINOLE, F	_VD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD (HUETT, EDWA 11291 PARK E SEMINOLE, F	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JILL HUETT PRES 01/13/2006