- 2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 15, 2006 08:00 AM DOCUMENT # P93000053593 **Secretary of State** 1. Entity Name THE LAW OFFICES OF WILLIAM D. TUCKER, P.A. Principal Place of Business Mailing Address 718 NE 2ND AVENUE 718 NE 2ND AVENUE FT. LAUDERDALE, FL 33304 FT. LAUDERDALE, FL 33304 US No Chg-P 03082006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. EEI Number 65-0421448 Not Applicat \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent MOXON, GEORGE L DO NOT WRITE 718 NE 2ND AVE. FT. LAUDERDALE, FL 33304 IN THIS SPACE 6. 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME TUCKER, WILLIAM STREET ADDRESS 718 NE 2ND AVE. FORT LAUDERDALE, FL 33304 City-ST-ZIP U00000467951 03/24/06-80011-014 150.00 NAME STREET ADDRESS CHY-ST-78 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP DILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME SZERDON TEERTS CITY-ST-ZIP

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 truetge 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 approximation of the receiver or truetge empowered.

SIGNATURE: .

SIGNATURE AND TYPED OF

FILED