

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # P93000085387 (7)

1. Corporation Name:

TUCKER MANAGEMENT CORPORATION

Principal Place of Business:

**3948 SUNBEAM RD.
SUITE 4
JACKSONVILLE FL 32257**

Mailing Address:

**3948 SUNBEAM RD.
SUITE 4
JACKSONVILLE FL 32257**



3. Date Incorporated or Qualified
12/10/1993

3a. Date of Last Report
03/24/1995

4. FID Number
59-3214862

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 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

10. Name and Address of New Registered Agent

2. Principal Place of Business:

21. Suite, Apt., #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address:

26. Suite, Apt., #, etc.

27. City & State

28. Zip

29. Country

9. Name and Address of Current Registered Agent

**TUCKER, ROBERT
3948 SUNBEAM RD.
SUITE 4
JACKSONVILLE FL 32257**

81. Name

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

83. City

84. Zip Code

FL

85. Zip Code

11. Pursuant to the provisions of Section 607.011 and 607.012, 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, the undersigned, accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.011, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12a. President ☐ Officer

NAME: **PD ROBERT TUCKER,**
STREET ADDRESS: **3948 SUNBEAM RD., STE. 4**
CITY-STATE-ZIP: **JACKSONVILLE FL 32257**

12b. Vice President ☐ Officer

NAME: **VPSD MARGARET TUCKER,**
STREET ADDRESS: **3948 SUNBEAM RD., STE. 4**
CITY-STATE-ZIP: **JACKSONVILLE FL 32257**

12c. Secretary ☐ Officer

NAME: **[] OFFICER**
STREET ADDRESS: **[] OFFICER**
CITY-STATE-ZIP: **[] OFFICER**

12d. Treasurer ☐ Officer

NAME: **[] OFFICER**
STREET ADDRESS: **[] OFFICER**
CITY-STATE-ZIP: **[] OFFICER**

12e. Director ☐ Officer

NAME: **[] OFFICER**
STREET ADDRESS: **[] OFFICER**
CITY-STATE-ZIP: **[] OFFICER**

12f. Director ☐ Officer

NAME: **[] OFFICER**
STREET ADDRESS: **[] OFFICER**
CITY-STATE-ZIP: **[] OFFICER**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13a. Officer ☐ Change ☐ Addition

13b. Director ☐ Change ☐ Addition

13c. Secretary ☐ Change ☐ Addition

13d. Treasurer ☐ Change ☐ Addition

13e. Director ☐ Change ☐ Addition

13f. Director ☐ Change ☐ Addition

13g. Director ☐ Change ☐ Addition

13h. Director ☐ Change ☐ Addition

13i. Director ☐ Change ☐ Addition

13j. Director ☐ Change ☐ Addition

13k. Director ☐ Change ☐ Addition

13l. Director ☐ Change ☐ Addition

13m. Director ☐ Change ☐ Addition

13n. Director ☐ Change ☐ Addition

13o. Director ☐ Change ☐ Addition

13p. Director ☐ Change ☐ Addition

13q. Director ☐ Change ☐ Addition

13r. Director ☐ Change ☐ Addition

13s. Director ☐ Change ☐ Addition

13t. Director ☐ Change ☐ Addition

SIGNATURE:

Robert Tucker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT TUCKER

3/26/96

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CR2E034 (12/95)