

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000032675

FILED  
Apr 06, 2005  
Secretary of State

**Entity Name:** TECHNICAL CONSTRUCTION OF PINELLAS COUNTY, INC.

**Current Principal Place of Business:**

P.O. BOX 2064  
TARPON SPRINGS, FL 34688

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2064  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

**FEI Number:** 59-3242829

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOVE, JEFF  
522 E LEMON ST.  
TARPON SPRINGS, FL 34689 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LOVE, JEFF  
Address: 522 E LEMON ST  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP ( ) Delete  
Name: INNO, FRANK  
Address: 409 S SPRING BLVD  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: S ( ) Delete  
Name: DEMSKY, JOEL  
Address: 625 GINNT DR  
City-St-Zip: PORT RICHEY, FL 34668

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** JEFF LOVE

P

04/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date