

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000006797

1. Entity Name  
TUG N. TWO, INC.



Principal Place of Business  
3670 S. WESTSHORE BLVD.  
TAMPA, FL 33629

Mailing Address  
3670 S. WESTSHORE BLVD.  
TAMPA, FL 33629

FILED  
06 APR 28 AM 7:37  
TALLAHASSEE, FLORIDA



01112006 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3290585  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

VONSPIEGELFELD, ALLEN K  
501 E KENNEDY BLVD.  
SUITE 1700  
TAMPA, FL 33602

DO NOT WRITE  
IN THIS SPACE

8. 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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DANN, RODNEY H JR 730 S STERLING AVE STE 305 TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS VONSPIEGELFELD, ALLEN K 501 E. KENNEDY BLVD., #1700 TAMPA, FL 33602
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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 trustee 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 address, with all other like empowered.

SIGNATURE: Rodney H Dann  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-06 (813)251 5100  
Date Daytime Phone #