## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name P96000002155 (5) TUCKER & TUCKER, INC. Principal Place of Business Mailing Address 1208 VIA DELUNA 1208 VIA DELLINA PENSACOLA BEACH FL 32561 PENSACOLA BEACH FL 32561 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/02/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3346425 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Ζıp 8. This corporation owes or has paid the current year Intangible Yes 25 29 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TUCKER, AL S 1208 VIA DELUNA 82 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL 32581 83 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, 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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and lifte it applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition TOTAL F 1 1 TITLE Chance TUCKER, AL S NAME 12 NAME 1208 VIA DELUNA STREET ADDRESS 1.3 STREET ADBRESS PENSACOLA FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE TITLE Addition TUCKER, JACQUELINE E 2.2 NAME 1208 VIA DELUNA 2.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE TITLE 31 THIF Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 2IP DELETE Change ☐ Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment your an indicates.

SIGNATURE:

**FILED**