

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90013 033 ***158.75

DOCUMENT # P96000003047

1. Entity Name
PRATTCO INC.



Principal Place of Business
26324 WESLEY CHAPEL BLVD
LUTZ, FL 33559 US

Mailing Address
26324 WESLEY CHAPEL BLVD
LUTZ, FL 33559 US

DO NOT WRITE IN THIS SPACE



01042008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3352522

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PRATT, ELMER S III
5002 GROVE MANOR COURT
PLANT CITY, FL 33565

**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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	PRATT, ELMER S III
STREET ADDRESS	5002 GROVE MANOR CT 9316 MERLOT CIR
CITY-ST-ZIP	PLANT CITY, FL 33565 SEFFNER, FL 33584
TITLE	D
NAME	PRATT, CHERYL
STREET ADDRESS	5002 GROVE MANOR CT 9316 MERLOT CIR
CITY-ST-ZIP	PLANT CITY, FL 33565 SEFFNER, FL 33584
TITLE	VP
NAME	SOLOMON, ROBERT R
STREET ADDRESS	16006 ROBEY CT
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Elmer S. Pratt III* Elmer S. PRATT III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/08 813-973-4771

Date

Daytime Phone #