

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000035851

1. Entity Name
T&T PROPERTY MAINTENANCE, INC.



Principal Place of Business

**5119 18TH STREET WEST
BRADENTON, FL 34207**

Mailing Address

**5119 18TH STREET WEST
BRADENTON, FL 34207**



02282006 No Chg-P CR2E004 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEH Number
65-0664835

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BARRETT, ANTHONY W
5119 18TH ST W
BRADENTON, FL 34207**

**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 *Anthony W Barrett*

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when nonattorney)

DATE

3-1-06

**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
VP
BARRETT, THOMAS
4215 18TH AVENUE DR W
BRADENTON, FL 34206

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
P
BARRETT, ANTHONY W
5119 18TH ST W
BRADENTON, FL 34207

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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TITLE
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CITY- ST- ZIP

000000462121
03/21/06-80023-005 150.00

**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 its 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 in changed, or on an attachment with an address, with all other IMA empowered.

SIGNATURE: *Anthony W Barrett*

SIGNATURE AND THREE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-06

DATE

DEPT. PHONE #