

FILED
Apr 27, 2007 8:00 am
Secretary of State

DOCUMENT # P96000041066

Mailing Address
3535 HWY 17 N
WINTER HAVEN, FL 33880

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04182007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3385330

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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TUCKER, LARRY D SR
3535 US HWY 17 NORTH
WINTER HAVEN, FL 33882

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, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TUCKER, LARRY D
STREET ADDRESS	3535 HWY 17 N
CITY-ST-ZIP	WINTER HAVEN, FL 33880

TITLE	D
NAME	TUCKER, LARRY D JR
STREET ADDRESS	3535 HWY 17 N
CITY-ST-ZIP	WINTER HAVEN, FL 33880

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Larry D. Tucker 4/25/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone # _____