

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 04, 2005 8:00 am**  
**Secretary of State**

03-04-2005 90090 018 \*\*\*150.00

**DOCUMENT # P97000031578**

1. Entity Name

MOSQUITO CREEK INVESTMENT CORP.



Principal Place of Business

2200 NAPOLEON BONAPARKE  
TALLAHASSEE FL 32308  
US

Mailing Address

2200 NAPOLEON BONAPARKE  
TALLAHASSEE FL 32308  
US



2. Principal Place of Business

~~3000~~ 3033 TANAGER TRAIL

Suite, Apt. #, etc.

TALLAH

3. Mailing Address

3033 TANAGER TRAIL

Suite, Apt. #, etc.

TALLAHASSEE, FL

City & State

TALLAHASSEE, FL

Zip

32303-2606

Country

LEON

City & State

TALLAHASSEE, FL

Zip

32303-2606

Country

LEON

1st MOORE

CR2E034 (10/04)

4. FEI Number

59-3438860

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

GUARISCO, PETER  
3350 W LAKESHORE DR  
TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME MAYO, WAYNE O  
STREET ADDRESS 1150 BELL ROAD  
CITY-ST-ZIP HAVANA FL 32333

TITLE ☐ Delete  
NAME HARTSFIELD, D B  
STREET ADDRESS 1206 MIMOSA DRIVE  
CITY-ST-ZIP TALLAHASSEE FL 32312

TITLE ☒ Delete  
NAME RICRE, TANGO A  
STREET ADDRESS 2200 NAPOLEON BONAPARKE  
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME MAYO  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME R. KENNETH MAYO  
STREET ADDRESS 3033 TANAGER TR  
CITY-ST-ZIP TALLAHASSEE, FL 32303-2606

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: R. KENNETH MAYO R. Kenneth Mayo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/05

Date

850-567-4011

Daytime Phone #