

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2008 8:00 am**  
**Secretary of State**

04-25-2008 90123 034 \*\*\*150.00

**DOCUMENT # V22438**

1. Entity Name  
TUCKER PROPERTY LEASING, INC.



Principal Place of Business  
3535 U.S. HIGHWAY 17 NORTH  
WINTER HAVEN, FL 33881

Mailing Address  
3535 U.S. HIGHWAY 17 NORTH  
WINTER HAVEN, FL 33881

40001001



04032008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3112905

Applied For

Not Applicable

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

**6. Name and Address of Current Registered Agent**

TUCKER, LARRY D.  
3535 U.S. HWY 17, N.  
WINTER HAVEN, FL 33881

**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 PD  
NAME TUCKER, LARRY D.  
STREET ADDRESS 3535 US HWY 17 N  
CITY-ST-ZIP WINTER HAVEN, FL 33831

TITLE D  
NAME TUCKER, LARRY D., JR.  
STREET ADDRESS 3535 US HWY 17 N  
CITY-ST-ZIP WINTER HAVEN, FL 33881

TITLE D  
NAME RICE, JOHN WEBSTER  
STREET ADDRESS 306 N BUCK PARK  
CITY-ST-ZIP WINTER HAVEN, FL 33884

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/08

Date

Daytime Phone #