

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 383028 (8)

1. Corporation Name
TYRONE PROFESSIONAL BUILDING, INC.



Principal Place of Business: **2105 TYRONE BLVD NORTH ST PETERSBURG FL 33710**
Mailing Address: **2105 TYRONE BLVD NORTH ST PETERSBURG FL 33710**

3. Date Incorporated or Qualified: **06/01/1971** 3a. Date of Last Report: **02/14/1995**
4. FEI Number: **59-1439457** Applied For: Not Applicable:
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21
2a. Mailing Address: 26
22. City & State: 27
23. Zip: 28
24. Country: 29

9. Name and Address of Current Registered Agent

**EZZO, JOSEPH A
2105 TYRONE BLVD
ST PETERSBURG FL 33710**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City: **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	EZZO MD, JOSEPH A	<input type="checkbox"/> DELETE
NAME	2105 TYRONE BLVD.	
STREET ADDRESS	ST PETERSBURG FL	
CITY - ST - ZIP	PD	<input type="checkbox"/> DELETE
TITLE	EZZO, CHRISTOPHER	<input type="checkbox"/> DELETE
NAME	10244 130TH WAY, NORTH	
STREET ADDRESS	LARGO FL	
CITY - ST - ZIP	S	<input type="checkbox"/> DELETE
TITLE	EZZO, HELEN	<input type="checkbox"/> DELETE
NAME	2105 TYRON BLVD	
STREET ADDRESS	ST PETERSBURG FL	
CITY - ST - ZIP	VP	<input type="checkbox"/> DELETE
TITLE	MCGETTIGAN, PATRICE, E.	<input type="checkbox"/> DELETE
NAME	5440 JOE'S CREEK DRIVE N	
STREET ADDRESS	ST. PETERSBURG FL	
CITY - ST - ZIP		<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph A. Ezzo

1/19/96 813-347-5193
Date Office Phone #

CR2E034 (12/95)