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CORPORATION ANNUAL REPORT



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

1996

(4)

DOCUMENT # 1. Corporation Name

BARR, MURMAN & TONELLI, P.A.

Principal Place of Business Mailing Address					#11 #1810 #1E	191 01011 01011 100 1	
201 E. KENNEDY BLVD., SUITE 901 P. O. BOX 172118 TAMPA FL 33672-0118 US 2. Principal Place of Business		201 E. KENNEDY BLVD SUITE 901 P. O. BOX 172118 TAMPA FL 33672-0118 US 2a. Mailing Address 26 P. O. 1304 172669					
				3. Date Incorporated or Qualified 3a. Date of Last Report 06/19/1995			
				4. FE: Number 50-1740915			Applied For Not Applicable
Suite Apt #	Box 172669	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	×		Additional Required
City & State 23 TAM	PA, FL	City & State 28 TAMPA, F	-2	Election Campaign Financing Trust Fund Contribution			May Be d to Fees
Zp - 122/2/2-1	Country	29 33677-0669	Country	8. This corporation has liability for		under s	199.032,
E COOLA .	9. Name and Address of Curren		[30]	Florida Statutes Yes 10. Name and Address of New F	No No	cont	
	g and reduced or quiter	giotorou ngent	81 Name	TV. Haine and Address of New P	registered A	Aciir	·
MURM	AN, JAMES A.						
	KENNEDY BLVD. STE 901		62 Street Add	tress (P.O. Box Number is Not Acceptat	ole)		
	\ FL 33602-0941		83				
							
			B4 City		FL	85 Zip	o Code
familiar witi	h, and accept the obligations of Speti Subsure spect or parted name of registere, agent,	ori 607.0505, Florida <u>Statutes.</u> Beltikorapisare <u>INO</u>	Regulered Agent signature reque		DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	· · · · · · · · · · · · · · · · · · ·		
TITLE	TONELLI, MICHAEL A.	DEL ETE	1 1 TITLE			Change	☐ Addition
NAME	201 E. KENNEDY STE 901		1 2 NAME				
STREET ADDRESS	TAMPA FL		13 STREET ADDRESS				
CHY-ST-ZIP TITLE	VPS	DELETE	1 4 CITY - ST - Z-P			Change	Addition
NAME	TONELLI, MICHAEL A.	Поселе	2 2 NAME		L	Gliange	☐ ¥60⊞0⊞
STREET ADDRESS	201 E. KENNEDY STE 901		2.3 STREET ADDRESS				
CITY - ST - ZIP	TAMPA FL		2.4 C-TY - ST - ZiP				
TITLE	TD	DELETE	3 1 liftE			Change	Addition
NAME	MURMAN, JAMES A.	_	3.2 NAME		_		
STREET ADDRESS	201 E. KENNEDY STE 901		3.3 STREET ADDRESS				
CITY - ST - ZIP	TAMPA FL		3.4 Crty - St - ZiP				
Trile	7 7 May 11 - 2 7 7 May 2 Ann Administration on the control of the	☐ DELETE	4 1 TiTLE			Change	Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4.C(TY - ST - Z(P				
TITLE		☐ DELETE	5. 1 TITLE] Change	Addition
N4ME			5.2 NAME				
STREET ADDRESS			5 3 STREET ADDRESS				
CHTY - ST - ZIP		EJ DOLOT	5 4 CITY - ST - ZIP			1.05	Proj. d. a. a. a.
TATLE		DELETE	6 1 1 TLE] Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY - ST - 7/2			EACITY ST 710				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality 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 early; 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 13 if changed, or on an attachment with an address. MICHAEL A. TONELLI

SIGNATURE:

MICHA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR