

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -3 PM 1:44

DOCUMENT # 711069 (5)
1. Corporation Name

TAMPA BUILDERS' EXCHANGE, INC.

Principal Place of Business Mailing Address
605 SO FREMONT AVE 605 SO FREMONT AVE
TAMPA FL 33606 TAMPA FL 33606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/21/1966	3a. Date of Last Report 02/21/1994
4. FEI Number 59-0474893	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

9. Name and Address of Current Registered Agent DIAZ, ELIER 4319 CULBREATH RD VALRICO FL 33594	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]* **ELIER A. DIAZ** DATE **1-31-95**
Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when nonstatic.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBBINS, JAY	1.2 NAME	(See Attached)
STREET ADDRESS	13001 NO NEBRASKA AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERRY, BRYAN	2.2 NAME	
STREET ADDRESS	1525 W KENNEDY BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIAZ, ELIER	3.2 NAME	
STREET ADDRESS	4319 CULBREATH RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	VALRICO FL	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARDY, JIM	4.2 NAME	
STREET ADDRESS	4210 EL PRADO BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUY, DANA	5.2 NAME	
STREET ADDRESS	13215 N NEBRASKA AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, MERLYN	6.2 NAME	
STREET ADDRESS	14828 WINDING CREEK CT	6.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	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 110.07(3)(b), Florida Statute. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **ELIER A. DIAZ** DATE **1-31-95** (813) 253-5733
Signature and typed or printed name of signing officer or director (Indicate Filing Office #)

TAMPA BUILDERS EXCHANGE, INC.

OFFICE AND DIRECTORS

P	ROBBINS, JAY	13001 N. NEBRASKA AVE.	TAMPA, FL
1ST V	DIAZ, DEL	1704 W. GRACE ST.	TAMPA, FL
2ND V	HARDY, JIM	4210 EL PRADO BLVD.	TAMPA, FL
T	DIAZ, ELIER	4319 CULBREATH ROAD	VALRICO, FL
S	BERRY, BRYAN	1525 W. KENNEDY BLVD.	TAMPA, FL
P P	FRENCH, DON	3818 N. 40TH STREET	TAMPA, FL
D	BRAMMER, TOM	5313 W. CRENSHAW ST.	TAMPA, FL
D	BROWN, MERLYN	14826 WINDING CREEK CT.	TAMPA, FL
D	GUY, DANA	13215 N. NEBRASKA AVE.	TAMPA, FL
D	HERTER, TOM	8707 RIVER FOREST CIR.	TAMPA, FL
D	HILE, CHARLES	4504 TOWN N' COUNTRY	TAMPA, FL
D	PERDUE, JIM	1111 N. WESTSHORE BLVD. #305	TAMPA, FL
D	RANON, CARLOS	5109 N. HOWARD AVE.	TAMPA, FL
D	VIGUE, SCOTT	1012 N. HOWARD AVE.	TAMPA, FL