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Apr 16 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 716643 (2)

1. Corporation Name

TYRONE VILLAS, INC. NO. 4 A CONDOMINIUM



Principal Place of Business

Mailing Address

7839 38 PL. NO.  
ST PETERSBURG FL 337097839 38 PL. NO.  
ST PETERSBURG FL 33709-42273. Date Incorporated or Qualified  
05/27/19693a. Date of Last Report  
04/25/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City &amp; State

24 Zip Country

9. Name and Address of Current Registered Agent

SEDATE, IRENE  
7848 39TH TERRACE NO.  
ST. PETERSBURG FL 33709

81 Name VINCENT L. POWER

82 Street Address (P.O. Box Number is Not Acceptable)  
7839 38th PL. No.

83 St. PETERSBURG FL 33709

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

VINCENT L. POWER

VINCENT L. POWER

4-9-97

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 D  
NAME OLSEN, EMMA  
STREET ADDRESS 7857 39TH AVENUE, N.  
CITY-ST-ZIP ST. PETERSBURG FLTITLE P  
NAME JULIANO, ALEX  
STREET ADDRESS 7842 39TH AVE NO.  
CITY-ST-ZIP ST PETERSBURG FLTITLE D  
NAME CANTLIN, MILDRED  
STREET ADDRESS 7868 40TH AVE N  
CITY-ST-ZIP ST PETERSBURG, FL 00000TITLE S  
NAME CHARRIER, RAYMOND  
STREET ADDRESS 7873 39TH TERR. NO.  
CITY-ST-ZIP ST PETERSBURG, FL 00000TITLE T  
NAME SEDATE, IRENE  
STREET ADDRESS 7848 39TH TERRACE NO.  
CITY-ST-ZIP ST PETERSBURG, FL 00000TITLE V  
NAME BRESEMANN, MARIE  
STREET ADDRESS 7836 39TH TERRACE NORTH  
CITY-ST-ZIP ST PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP2.1 TITLE P  
2.2 NAME BRESEMANN, MARIE  
2.3 STREET ADDRESS 7836 39th TERRACE NO.  
2.4 CITY-ST-ZIP ST. PETERSBURG FL 337093.1 TITLE D  
3.2 NAME JAMES SMITH.  
3.3 STREET ADDRESS 7854 39th AVE NO  
3.4 CITY-ST-ZIP ST. PETERSBURG FL 337094.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP5.1 TITLE T  
5.2 NAME POWER, VINCENT  
5.3 STREET ADDRESS 7807 38th PL. NO  
5.4 CITY-ST-ZIP ST. PETERSBURG FL 337096.1 TITLE V  
6.2 NAME JULIANO, ALEX  
6.3 STREET ADDRESS 7842 39th AVE NO.  
6.4 CITY-ST-ZIP ST. PETERSBURG FL 33709

14. I do 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 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: VINCENT L. POWER

4-9-97

813-381-2074

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0050606

CP2E037 (9/96)