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Secretary of State

04-08-1999 90018 041 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **K34061**

1. Corporation Name
TRI-EXCELLENCE, INC.

Principal Place of Business

% MARC H. BANNING
 12595 S BELCHER RD
 LARGO FL 34643

Mailing Address

% MARC H. BANNING
 12595 S BELCHER RD
 LARGO FL 34643

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/23/1988

4. FEI Number

59-2908664

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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

BANNING, MARC H.
 825 CYPRESS TRAILS DR.
 TARPON SPGS. FL 34689

10. Name and Address of New Registered Agent

81 Name *Marc H. Banning*
 82 Street Address (P.O. Box Number is Not Acceptable)
 83 *4175 Chesterfield Circle*
 84 City *Palm Harbor* FL 85 Zip Code *34683*

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	DP	<input type="checkbox"/> DELETE
NAME	BANNING, MARC HENSLAIGH	
STREET ADDRESS	825 CYPRESS TRAILS DR.	
CITY-ST-ZIP	TARPON SPGS. FL	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	BANNING, THERESE ELENA	
STREET ADDRESS	825 CYPRESS TRAILS DR.	
CITY-ST-ZIP	TARPON SPGS. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MARC H. BANNING	
1.3 STREET ADDRESS	4175 Chesterfield Circle	
1.4 CITY-ST-ZIP	PALM HARBOR FL 34683	
2.1 TITLE	SECRETARY-TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Therese E. Banning	
2.3 STREET ADDRESS	4175 Chesterfield Circle	
2.4 CITY-ST-ZIP	PALM HARBOR FL 34683	
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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marc H. Banning* 1/4/99 727-539-6455
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/1/98)