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

PROFIT CORPORATION ANNUAL REPORT



FEORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9500053378 (2)

1. Corporation Name

THOMAS P. MCNAMARA, P.A.

Principal Place of Business

Mailing Address

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



813 837 0727

Daytinie Phone #

| 3608 WAVERLY PLACE TAMPA FL 33629 | | 3608 WAVERLY PLACE TAMPA FL 33629 | | | |
|--|---|--------------------------------------|-------------------------------------|--|------------------------------------|
| | | | | 3. Date incorporated or Qualified 07/11/1995 | 3a. Date of Last Report |
| 2. Principal Pla 21 290 | ace of Business 9 Bay to Bay Blv | 2a. Mailing Address 26 Sume | as 2 | 4. FEI Number 59-3323520 | Applied For Not Applicable |
| Suite, Apt. # | #, etc. / / / / / / / / / / / / / / / / / / / | Suite, Apt #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | 200 P | Oity & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be |
| Zip | Country | 28 | Country | This corporation has liability for it. | Added to Fees |
| 24 336 | | [29] | 0] | Florida Statutes Yes | □No |
| | 9. Name and Address of Currer | it Registered Agent | 81 Name_ | 10. Name and Address of New R | |
| MCNAMARA, THOMAS P 82 Street Addition | | | | remas PM Na diress (P.O. Box Number is Not Acceptable 109 Bay +v B # 309 | ay Blvd |
| | | | 84 Crty _ | Tampa | FL 85 Zip Code 32629 |
| 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 botte, in the State of Florida. Such thange was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607 (555, Florida Statutes | | | | | |
| SIGNATURE Specific Specific Strand Control of Project Control of Proje | | | | | |
| 12. | OFFICERS AN | | 13. | ADDITIONS/CHANGES TO OFFI | |
| TITLE NAME | MCNAMARA, THOMAS P | ☐ DELETE | 1 1 TITLE 1 2 NAME | | Change Addition |
| STREET ADDRESS | 3608 WAVERLY PLACE | | 1.3 STREET ADDRESS | | |
| CITY-SI-ZIP | TAMPA FL 33629 | | 1.4 CHY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 2 1 T-FLE | | Change Addition |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CiTY-ST-ZiP | | | 2 4 CITY - ST - 7IP | | |
| TITLE | | ☐ DELETE | 3 1 7171.5 | | Change Addition |
| NAME | Y | | 3 2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP HILE | | ☐ DELETE | 3.4 City - 51 - 2if | | |
| NAME | | C) pereit | 4 1 TITLE 4 2 NAME | | Change Addition |
| STREET ADDRESS | | | | | |
| CITY - ST - ZIP | | | 4.3 STREET ADDRESS 4.4 CITY STI-ZIP | | |
| TITLE | | ☐ DELETE | 5 1 TITLE | | ☐ Change ☐ Addition |
| NAME | | <i>→</i> | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY - ST-ZIP | | | 5.4 CITY - ST-ZIP | | |
| TITLE | | DELETE | 6 1 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STHEET ADDRESS | | |
| CITY-S*-ZIP | 12 d | | 6 4 CITY - ST - 7-P | | |
| certify that | the information indicated on this annu | ial report or supplemental annual r | eoort is true and acc | fy for the exemption stated in Section 119. urate and that my signature shall have the this report as required by Chapter 607, Fic | same legal effect as if made under |

P95 000053378

LAW OFFICES

THOMAS P. McNamara, P. A.

2909 BAY TO BAY BOULEVARD SUITE 309 TAMPA, FLORIDA 33629

THOMAS P. McNAMARA

(813) 837-0727 FAX (813) 837-1532

April 29, 1996

CERTIFIED MAIL NO. P 142 605 451 RETURN RECEIPT REQUESTED

Annual Reports Section Division of Corporations P.O. Box 13900 Tallahassee, FL 32317

Re: Thomas P. McNamara, P.A.

Dear Sir or Madam:

On behalf of the above referenced corporation, I have enclosed the 1996 Corporation Annual Report and a check in the amount of \$200.00 to cover the fee for filing.

If you have any questions, please give me a call.

Sincerely,

Thomas P. McNamara

TPM/gmh

Enclosure

tpmpa\corresp\annrep96.doc