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May 06, 1999 8:00 am
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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P97000068388

1. Corporation Name
EQUITY COURT SERVICES OF TAMPA BAY, INC.



Principal Place of Business
104 S ARMENIA AVE
STE 7
TAMPA FL 33609
US

Mailing Address
104 S ARMENIA AVE
STE 7
TAMPA FL 33609
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/06/1997

4. FEI Number
59-3465232

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
21 103 SOUTH MOODY AVE.
Suite, Apt. #, etc.
22 STE G
City & State
23 TAMPA, FL
Zip
24 33609-3340 Country
25 USA

2a. Mailing Address
26 PO BOX 172096
Suite, Apt. #, etc.
27
City & State
28 TAMPA, FL
Zip
29 33672-0096 Country
30 USA

9. Name and Address of Current Registered Agent

STOLLER, WILLIAM R
104 S ARMENIA AVE
STE 7
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
103 SOUTH MOODY AVE.
83 STE. G
84 City TAMPA FL 85 Zip Code 33609-3340

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 *William R. Stoller, William R. STOLLER, PRESIDENT* DATE 04-28-99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	STOLLER, WILLIAM R	104 S ARMENIA AVE, STE #7	TAMPA FL 33609	<input type="checkbox"/>
VD	STOLLER, LOIS M	185 W STREET	NWBURG NY 12550	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
1.1				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2						
1.3		PO BOX 172096	TAMPA, FL 33672-0096			
1.4						
2.1				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2						
2.3		185 WEST STREET	NEWBURGH, NY 12550			
2.4						
3.1					<input type="checkbox"/>	<input type="checkbox"/>
3.2						
3.3						
3.4						
4.1					<input type="checkbox"/>	<input type="checkbox"/>
4.2						
4.3						
4.4						
5.1					<input type="checkbox"/>	<input type="checkbox"/>
5.2						
5.3						
5.4						
6.1					<input type="checkbox"/>	<input type="checkbox"/>
6.2						
6.3						
6.4						

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: *William R. Stoller, William R. STOLLER, PRESIDENT* DATE 04-28-99 (813)253-0372

CR2E034 (1/198)