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FILED

Jan 27 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 550167 (1)

1. Corporation Name

TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL &  
MULLIS, PROFESSIONAL ASSOCIATION

Principal Place of Business

101 E.KENNEDY BLVD.2700 BARNETT PLZ  
P.O.BOX 1102  
TAMPA FL 33602

Mailing Address

101 E.KENNEDY BLVD.2700 BARNETT PLZ  
P.O.BOX 1102  
TAMPA FL 33602



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

25 Suite, Apt. #, etc.

26 City & State

27 Zip

28 Country

3. Date Incorporated or Qualified

10/28/1977

4. FEI Number

59-1772042

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MULLIS, HAROLD W.  
101 E KENNEDY BLVD  
TAMPA FL 33602

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 Harold W. Mullis, Pres.  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/15/98  
DATE

12. OFFICERS AND DIRECTORS

TITLE VTD  
NAME BARKIN, MARVIN E  
STREET ADDRESS 101 E.KENNEDY BLVD.  
CITY-ST-ZIP TAMPA, FL 00000 ☐ DELETE

TITLE PD  
NAME MULLIS, JR. H  
STREET ADDRESS 101 E KENNEDY BLVD  
CITY-ST-ZIP TAMPA, FL 00000 ☐ DELETE

TITLE VSD  
NAME O'NEILL JR, ALBERT C  
STREET ADDRESS 101 E.KENNEDY BLVD.  
CITY-ST-ZIP TAMPA, FL 00000 ☐ DELETE

TITLE VD  
NAME FRYE, WILLIAM C.  
STREET ADDRESS 101 E.KENNEDY BLVD.  
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP Tampa, FL 33602

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP Tampa, FL 33602

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP Tampa, FL 33602

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP Tampa, FL 33602

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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.

SIGNATURE: Harold W. Mullis, Pres.

1/15/98  
DATE

CF2E034 (10/97)