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FILED
May 19 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 # 580973 (6)

1. Corporation Name
KIMCO OF TAMPA, INC.

702



Principal Place of Business
KIMCO REALTY CORP.
P.O. BOX 5020
NEW HYDE PARK NY 11042-0020

Mailing Address
KIMCO REALTY CORP.
P.O. BOX 5020
NEW HYDE PARK NY 11042-0020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/02/1978

4. FEI Number

11-2513372

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature type or printed name of registered agent and, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
COOPER, MILTON
STREET ADDRESS 3333 NEW HYDE PK. RD. 100
CITY-ST-ZIP NEW HYDE PARK NY 11042

TITLE ☐ DELETE

NAME D
KIMMEL, MARTIN
STREET ADDRESS 3333 NEW HYDE PK. RD. 100
CITY-ST-ZIP NEW HYDE PARK NY 11042

TITLE ☐ DELETE

NAME P
FLYNN, MIKE
STREET ADDRESS 3333 NEW HYDE PARK ROAD
CITY-ST-ZIP NEW HYDE PARK NY

TITLE ☐ DELETE

NAME VP
WEISS, ALEX
STREET ADDRESS 3333 NEW HYDE PK. RD. 100
CITY-ST-ZIP NEW HYDE PARK NY 11042

TITLE ☐ DELETE

NAME T
RETRA, LOUIS
STREET ADDRESS 3333 NEW HYDE PARK RD. 100
CITY-ST-ZIP NEW HYDE PARK NY 11042

TITLE ☐ DELETE

NAME S
SCHULMAN, ROBERT
STREET ADDRESS 3333 NEW HYDE PK. RD. 1000
CITY-ST-ZIP NEW HYDE PARK NY 11042

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

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

Michael P. ...

Michael P. ...

CR2E034 (10/97)