

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 211410 (6)

1. Corporation Name

PAN AMERICAN APARTMENTS INC



Principal Place of Business

145 10TH AVE N
ST PETERSBURG FL 33701

Mailing Address

145 10TH AVE N
ST PETERSBURG FL 33701

2. Principal Place of Business

21 Same

Suite, Apt. #, etc.

22 City & State

23 Same

Zip

24 Same

Country

25 Pinellas

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

27 City & State

28 Same

Zip

29 Same

Country

30 Pinellas

3. Date Incorporated or Qualified

04/08/1958

3a. Date of Last Report

04/12/1995

4. FFL Number

59-0936194

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GRAY, MARY R.
145 10TH AVENUE NORTH
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name

Same

82 Street Address (P.O. Box Number is Not Acceptable)

Same

83 City

Same

84 State

FL

85 Zip Code

Same

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 Mary R. Gray, Treasurer/Mgr.

Mary R. Gray

Mar 11, 1996

12. OFFICERS AND DIRECTORS

11a. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11b. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11c. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11d. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11e. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11f. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

P
MARZOLI, ALBERT
145 10TH AVENUE NORTH
ST PETERSBURG FL

☐ DELETE

V
TWEED, ORLENE
145 10TH AVENUE NORTH
ST PETERSBURG FL 33701

☒ DELETE

V
LABASCIO, GRACE
145 10TH AVENUE NORTH
ST PETERSBURG FL

☐ DELETE

S
BENT, DONNA
145 10TH AVENUE NORTH
ST PETERSBURG FL

☐ DELETE

T
GRAY, MARY R.
145 10TH AVENUE NORTH
ST PETERSBURG FL

☐ DELETE

13.

11a. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11b. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11c. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11d. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11e. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11f. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

Same

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Mary R. Gray, Treas./Mgr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 11, 1996

813-821-2801

CR2E034 (12/95)