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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 324000 (9)

To: Corporation Secretary

TAMPA SPRING CO.

Principal Place of Business

Mailing Address

**8820 BROOKS ST
TAMPA FL 33604**

**8820 BROOKS ST
TAMPA FL 33604**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/11/1967

3a. Date of Last Report

04/25/1994

4. FEI Number

59-1198637

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

**8. This corporation has liability for intangible tax under § 199.032,
Florida Statutes. ☒ Yes ☐ No**

2. Principal Place of Business

2a. Mailing Address

21. State Apt. # etc.

26. State Apt. # etc.

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

29. City & State

25. City & State

30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MESSINA, JOHN JR.
7816 RIVER SHORE DR.
TAMPA FL 33604**

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 607.1509, 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 of Agent or person authorized to sign on behalf of the corporation)

(Signature of Registered Agent or person authorized to sign on behalf of the corporation)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1. NAME: DP
AZZARELLI, BARTLE
2. STREET ADDRESS: 8820 BROOKS STREET
3. CITY & STATE: TAMPA FL**

**1.1 NAME: ☐ Change ☐ Addition
1.2 NAME: ☐ Change ☐ Addition
1.3 STREET ADDRESS: ☐ Change ☐ Addition
1.4 CITY & STATE: ☐ Change ☐ Addition**

**2. NAME: DV
AZZARELLI, PETER J
3. STREET ADDRESS: 8820 BROOKS STREET
4. CITY & STATE: TAMPA FL**

**2.1 NAME: ☐ Change ☐ Addition
2.2 NAME: ☐ Change ☐ Addition
2.3 STREET ADDRESS: ☐ Change ☐ Addition
2.4 CITY & STATE: ☐ Change ☐ Addition**

**3. NAME: STD
MESSINA, JOHN, JR.
4. STREET ADDRESS: 8820 BROOKS STREET
5. CITY & STATE: TAMPA FL**

**3.1 NAME: ☐ Change ☐ Addition
3.2 NAME: ☐ Change ☐ Addition
3.3 STREET ADDRESS: ☐ Change ☐ Addition
3.4 CITY & STATE: ☐ Change ☐ Addition**

**4. NAME: ☐ Change ☐ Addition
5. STREET ADDRESS: ☐ Change ☐ Addition
6. CITY & STATE: ☐ Change ☐ Addition**

**4.1 NAME: ☐ Change ☐ Addition
4.2 NAME: ☐ Change ☐ Addition
4.3 STREET ADDRESS: ☐ Change ☐ Addition
4.4 CITY & STATE: ☐ Change ☐ Addition**

**5. NAME: ☐ Change ☐ Addition
6. STREET ADDRESS: ☐ Change ☐ Addition
7. CITY & STATE: ☐ Change ☐ Addition**

**5.1 NAME: ☐ Change ☐ Addition
5.2 NAME: ☐ Change ☐ Addition
5.3 STREET ADDRESS: ☐ Change ☐ Addition
5.4 CITY & STATE: ☐ Change ☐ Addition**

**6. NAME: ☐ Change ☐ Addition
7. STREET ADDRESS: ☐ Change ☐ Addition
8. CITY & STATE: ☐ Change ☐ Addition**

**6.1 NAME: ☐ Change ☐ Addition
6.2 NAME: ☐ Change ☐ Addition
6.3 STREET ADDRESS: ☐ Change ☐ Addition
6.4 CITY & STATE: ☐ Change ☐ Addition**

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information included in 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 that the event or transaction represented to occur in this report is reported by Chapter 607, Florida Statutes, and that my name appears in Block 1, 2, or 3 of this report if changed, or on an attachment with an addition.

SIGNATURE:

John Messina, Jr.

4-17-95

(813) 933-2805

0590784 CP