

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 379196 (9)

1. Corporation Name

GRAEBEL/TAMPA BAY MOVERS, INC.



Principal Place of Business

5433 W. CRENSHAW STREET
TAMPA FL 33634-3008

Mailing Address

5433 W. CRENSHAW STREET
TAMPA FL 33634-3008

3. Date Incorporated or Qualified
03/23/1971

3a. Date of Last Report
02/08/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1321351

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

10. Name and Address of New Registered Agent

PARDEE, JOHN S.
5433 W. CRENSHAW STREET
TAMPA FL 33614

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, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-instating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT ☐ DELETE

NAME GRAEBEL, DAVID W.
STREET ADDRESS 401 S. AIRPORT BLVD.
CITY-STATE-ZIP AURORA CO 80017

1.1 TITLE P/T/D ☐ Change ☒ Addition

TITLE VD ☐ DELETE

NAME WARE, LANE G.
STREET ADDRESS 500 THIRD ST. STE. 700
CITY-STATE-ZIP WAUSAU WI 54403

2.1 TITLE ☐ Change ☐ Addition

TITLE SD ☐ DELETE

NAME GRAEBEL, LOIS G.
STREET ADDRESS 500 THIRD ST. STE. 700
CITY-STATE-ZIP WAUSAU WI 54403

3.1 TITLE ☒ Change ☐ Addition

TITLE AS ☐ DELETE

NAME BROBACK, CRAIG
STREET ADDRESS 720 3RD STR
CITY-STATE-ZIP WAUSAU WI

4.1 TITLE ☐ Change ☐ Addition

TITLE CFO ☐ DELETE

NAME LEE, GENE C
STREET ADDRESS 401 S AIRPORT BLVD
CITY-STATE-ZIP AURORA CO

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

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:

[Signature]
Signature and typed or printed name of signing officer or director
Lane Ware, Vice President

2/9/96 (715) 845-4336

Date Daytime Phone #

CR2E034 (12/95)