FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 538508

(3)

P. GRECO & SONS, INC.

Principal Place 5044 DOVER S ST PETERSBUI			Mailing Address 5044 DOVER STREET, N.E. ST PETERSBURG FL 33703-3215				
					3. Date Incorporated or Qualified 07/01/1977	3a. Date of La	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	<u> </u>	Applied For
Sulte, Apt. #, etc		Suite, Apt. #, etc		59-1772932		Not Applicable 75 Additional	
22			27		5. Certificate of Status Desired	7	ee Required
City & State		City & State		6. Election Campaign Financing	\$5	.00 May Be	
23		28			Trust Fund Contribution		ded to Fees
Zip ──	Country	Zip 1	Country		8. This corporation has liability for intangible tax under s. 199.032,		
24	25 9. Name and Address of Currer	129 nt Registered Agent	30]		Florida Statutes 10. Name and Address of New Re	Yes No	
CEN	ITER JR., CLAVENCE E.	The state of the s	81	Name	To Manua and Manua of No.	gistorou Agoin	
	TURNER ST		82	Stroot Ado	dress (P.O. Box Number is Not Acceptab	do	
	ARWATER FL 34616		62	Sileer Auc	diess (F.O. hox Number is not Acceptab	ie)	
			83				
			84	City		85	Zip Code
11 0	1.0	0 - 1007 1100 11 11 01		L		FL "	
office or i	registered agent, or both, in the State	i of Florida. Such change was	authorized by	e-named cor y the corpora	poration submits this statement for the pation's board of directors. Thereby accep	urpose or changi of the appointmer	ng its registered it as registered
•	m familiar with, and accept the oblig	ations of, Section 607.0505, E	lorida Statute:	S			
SIGNATURE	Signature, typed or printed name of registered age	eer and tile diapploadre (NC	OTE Registered Age	ent signature reou	.ired when reinstating)	DATE	
12.		ID DIRLCTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	VP	[_] DELETE	1.1 TITLE			Cha	nge 🔛 Addition
NAME	GRECO, AL 5044 DOVER ST. NE		1.2 NAME				
STREET ADDRESS	ST. PETERSBURG FL		13 STREET				
CITY-\$T-ZIP	PT	DELETE	1.4 CHY - S 2.1 THUE	31 - 7 Pi		☐ Cha	inge Addition
NAME	GRECO, HELEN D.		2.2 NAME				
STREET ADDRESS	5044 DOVER ST., N.E.		2.3 STREET	ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL		2. 4 CiTY -	S1 - 2(P			
TITLE	AS	DETETE	3 1 11111			Cha	nge Addition
NAME	CENTER, CLARENCE E JR		3.2 NAME	Ì			
STREET ADDRESS	414 TURNER ST CLEARWATER FL		33 STREET				
CITY-ST-ZIP	OLEANWAIEN FL	DELETE	3.4. CITY - : 4.1 TITLE	S1 - 7 P		☐ Chai	nge 🔲 Addition
NAME		L. Petti	4 2 NAME			01101	ingo 🗀 Aodittoti
STREET ADDRESS	4 ¿.		4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CHY - S				J
TITLE		DELETE .	5.1 11746		!	Cha	nge 🔲 Addition
NAME			5.2 NAME				1
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP		T on ere	5.4 CHY-S	11- 7IP			
TITLE		LJ OFLETE	6.1 TOLE			Char	nge Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STREET	ADMODLES			
STREET WOODESS			■ U.S SPREEL	MUNUE 99			, i

14. I do 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 logal 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 13 if changed or on an attachment with an address.

SIGNATURE.

SIGNATURE:

CITY-ST-ZIP

526.3964

FILED

Mar 14 1997 8:00am

Secretary of State