

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

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **583461** (9)

1. Corporation Name
SPENDLESS BUILDING SUPPLIES, INC.

Principal Place of Business

Mailing Address

**12200 NEBRASKA AVE.
TAMPA FL 33612
US**

**12200 NEBRASKA AVE.
TAMPA FL 33612**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/25/1978	
21 12200 NEBRASKA AVE	26 12200 NEBRASKA AVE	4. FEI Number 59-1841462		Applied For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
City & State 23 Tampa FLA.		City & State 28 Tampa FLA.		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip 24 33612	Country 25 USA	Zip 29 33612	Country 30 USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
KROENKE, ROYCE A 12200 NEBRASKA AVE TAMPA FL 33612				81 Name NO CHANGE	
				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 office if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	☐ Change ☐ Addition
NAME	KROENKE, EDITH M.	1.2 NAME	
STREET ADDRESS	12200 N. NEBRASKA AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	TOLSON, GLADYS M.	2.2 NAME	
STREET ADDRESS	12200 N. NEBRASKA AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	
TITLE	PD	3.1 TITLE	☐ Change ☐ Addition
NAME	KROENKE, ROYCE, A	3.2 NAME	
STREET ADDRESS	317 BROOKLINE	3.3 STREET ADDRESS	
CITY-ST-ZIP	WESLEY CHAPEL FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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

ROYCE A KROENKE

CR2E034 (10/97)