Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



. FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 633563

1. Corporation Name

Principal Place of Business

CITY-ST-ZIP

JOSEPH V. CANNELLA REALTY, INC.

1120 SO. Dale Mabry Suite 201 Tampa Fl 33629-5007		1120 SO: DALE MABRY SUITE 201 TAMPA FL 33629-5007		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 08/23/1979		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Ar	plied For
21	المنظمين المحافظ المعادلة المنظمين المعادلة المنظمين المنظمين المنظمين المنظمين المنظم المنظم المنظم المنظم ال المنظم المنظم المنظ	26			59-1934123	" W No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			_	\$8.75	Additional
22		27			5. Certifcate of Status Desired	Fee Re	equired
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28		Trust Fund Contribution	•	to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year In		
24	25 29 30		a í		Personal Property Tax.	☐Yes	□No
	9. Name and Address of Curren		*I		10. Name and Address of New Registered	Agent	
	or realist and rea		81	Name	`		
CANNELLA, JOSEPH V.				L			····
1220 SO. DALE MABRY SUITE 201			82	Street	Address (P.O. Box Number is Not Acceptable)		
			83				
TAMI	PA FL 33609		84	City		85 Zip	Code
				City	FI	_ 00 -	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	iorizea by	the corp	corporation submits this statement for the purpose operation's board of directors. I hereby accept the appointment of the purpose of the purp	f changing its sintment as re	registered egistered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: Re	egistered Ager	nt signature i	required when reinstating) DATE		<u> </u>
12,	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	CANNELLA, JOSEPH V		1.2 NAME				
STREET ADDRESS	1220 S DALE MABRY #201		1.3 STREE	TADDRESS	1		ì
	TAMPA FL		1.4 CITY - S				İ
CITY-ST-ZIP TITLE	ST	☐ DELETE	2.1 TITLE	1-211		Change	Addition
	CANNELLA, GEMMA B		2.2 NAME				
NAME			l	TADORESS			{
STREET ADDRESS	1220 S DALE MABRY #201	,				÷	-
CITY-ST-ZIP	TAMPA FL		2.4 CITY-5	ST-ZIP		Change	Addition
TITLE		☐ DELETE	3.1 TITLE				
NAME			3.2 NAME				
STREET ADDRESS		1	3.3 STREE	TADDRESS			
C/TY-ST-ZIP			3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME	[.		4. 2 NAME				
STREET ADDRESS		•	4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME		•		,
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP	1.00		5.4 CITY-S	T-ZIP			ł
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME 101	E B.	-	6.2 NAME				
ATTENTION AND A STATE OF THE ST	Commence of the Commence of th		6.3 STREE	T ADDRESS			

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, with all other like empowered. SIGNATURE:

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90222 006 ***150.00