2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 16, 2007 8:00 am Secretary of State **DOCUMENT #733339** 01-16-2007 90182 035 ****61.25 TRI-COUNTY CENTRAL OFFICE, INC. Principal Place of Business Mailing Address 8019 N. HIMES #506 8019 N. HIMES #506 **TAMPA, FL 33614** TAMPA, FL 33614 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 01092007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-1605474 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH, TIMOTHY W 8019 N. HIMES Street Address (P.O. Box Number is Not Acceptable) **STE 506** TAMPA, FL 33614 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE _ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee Is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TD TITLE C D Delete TITLE CINDY VERNER 910 CRYSTAL TERRACE NAME MCCORKLE, JAY NAME STREET ADDRESS 15105 NIGHTHAWK DR STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33625** Plant City, FL. 33563 CITY-ST-ZIP TITLE CD Delete Addition SULVIA LACKMANN BILGER, AL NAME NAME 1806 East Norfork Street STREET ADDRESS 1913 E. CLIFTON AVE STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33610 CITY-ST-7IP Tampa, FL 33610 AD ППЕ Delete ППЕ Change ☐ Addition NAME MANLY, CHARLES Ed Pedico NAME STREET ADDRESS 4229 SUNRISE DR S 10722 DRUMMOND ROAD STREET ADDRESS CITY-ST-7IP SAINT PETERSBURG, FL 33705 TAMPA, FL 33615 CITY-ST-ZIP TITLE Delete Kevin Giglia 3801 South Lake Prive ☐ Addition NAME **CULLEN, TERRY** NAME 2424 W. TAMPA BAY BLVD. #M403 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33607 TAMPA, FL 33614 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ΠΠF ☐ Delete ΠΠF ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 reperience of the exemption of the corporation of the report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if standard true of the corporation of the report of the corporation of the report of the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information of the corporation of the report of the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information of the corporation of the report of the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information of the corporation of the corporation of the report of the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of the corporation of the report of the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of the exemption of the corporation of the corporation of the report of the exemption of the corporation of the corpora