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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90184 011 ***150.00

DOCUMENT # F85033

15	OTO C)PTICI/	ans of	TOWER	SQUARE,	INC

					•			
Principal Place of Business Mailing Address						I 1981/00 (19) (20) Struc 24/00 (10) State 2 (20) State 2 (20) State 2 (20)		
5761 MANATEE AVE. W. BRADENTON FL 34209 US 5761 MANATEE AVE. W. BRADENTON FL 34209 US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
						06/14/1982		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For		
21 26						59-2150460 Not Applicable		
Suite, Apt. #, etc.				*		5. Certificate of Status Desired See Required		
27					· · ·			
City & State	•	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible		
24	[25]	⊢ ' ⊢	0	•		Personal Property Tax. ☐ Yes ☐ No		
	9. Name and Address of Current				*	10. Name and Address of New Registered Agent		
				81	Name			
CLEMENS, GERALD L. 2302 PURDUE RD				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	PUNDUE RU DENTON FL 34207 .			83				
J DRAI	DENTON PL 34207			63				
				84	City	FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	the al	bove	e-named corpo	oration 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	· •					when reinstating) DATE		
	Signature, typed or printed name of registered agen OFFICERS AN		tegistered 13.	Agent	t signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	DP OFFICERS AN	DELETE	1.1 TI	TLE		Change Addition		
NAME	CLEMENS, GERALD L.		1.2 N	ME	1			
STREET ADDRESS	2302 PURDUE RD		1.3 ST	REET	ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34207		1.4 CF	TY-ST	r-2IP			
TITLE	D	☐ DELETE	2.1 ग्रा	ΠLE		☐ Change ☐ Addition		
NAME	CLEMENS, GERALD L		2.2 N	AME				
STREET ADDRESS	2302 PURDUE RD	~ .			ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34207	☐ DELETE	2.40		T-ZIP	☐ Change ☐ Addition		
TITLE			3.1 TT 3.2 NA			C over-ge C reduit		
NAME			1		ADDRESS			
STREET ADDRESS CITY-ST-ZIP	٠		3.4. C		- 1			
TITLE		☐ DELETE	4,1 TF			☐ Change ☐ Additi		
NAME			4. 2 N	AME				
STREET ADDRESS	•		4.3 \$1	TREET	ADDRESS			
CITY+ST-ZIP			-	TY-ST	T-ZIP			
TITLE	- -	☐ DELETE	5.1 TT		}	☐ Change ☐ Additi		
NAME	•		5.2 N/		ADDRESS			
STREET ADDRESS			5.3 ST 5.4 CI		ADDRESS			
CITY-ST-ZIP			3.4 ÇI	11+51	1.512			

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE

941-792-1777

Change

☐ Addition