FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -6 AM 9:40

DOCUMENT # **F94000000634 (5)**

1. Corporation Name
HOME SHOPPING CLUB OUTLET OF BRANDON, INC.

Principal Place of Business	Mailing Address
225 WEST BRANDON BLVD. BRANDON FL 33511	225 WEST BRANDON BLVD. BRANDON FL 33511

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/09/1994	3a. Date of Last Report:
4. FEI Number: 59-3221719	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26 P.O. Box 9090
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Clearwater, FL
Zip 24 / Country 25	Zip 29 34618-9090 / Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	STD	11 TITLE	D	☐ Change ☒ Addition
NAME	MCKEON, KEVIN J	12 NAME	Gerald F. Hogan	
STREET ADDRESS	2501 118TH AVENUE NORTH	13 STREET ADDRESS	2501 118th Avenue No.	
CITY-ST-ZIP	ST PETERSBURG FL	14 CITY-ST-ZIP	St. Petersburg, FL 33716	
TITLE	PD	21 TITLE		☒ Change ☐ Addition
NAME	REARDON, J M	22 NAME	Peter M. Kern	
STREET ADDRESS	2501 118TH AVENUE NORTH	23 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL	24 CITY-ST-ZIP		
TITLE	V	31 TITLE		☐ Change ☐ Addition
NAME	MINNEN, BRADLEY	32 NAME		
STREET ADDRESS	2501 118TH AVENUE NORTH	33 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL	34 CITY-ST-ZIP		
TITLE	AS	41 TITLE		☐ Change ☐ Addition
NAME	WATERS, ELIZABETH A	42 NAME		
STREET ADDRESS	2501 118TH AVENUE NORTH	43 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL	44 CITY-ST-ZIP		
TITLE	AT	51 TITLE		☐ Change ☐ Addition
NAME	RILEY, R J	52 NAME		
STREET ADDRESS	2501 118TH AVENUE NORTH	53 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL	54 CITY-ST-ZIP		
TITLE	AT	61 TITLE		☐ Change ☐ Addition
NAME	LYON, RICH	62 NAME		
STREET ADDRESS	2501 118TH AVENUE NORTH	63 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL	64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: _____ 3/24/95 (813)572-8585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Elizabeth A. Waters, Asst. Sec.

000448 - CP