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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000002910 (6)

TRU-CO., INC.

r	Principal Place of Business	Mailing Address
	9033 WEST 44TH STREET CLEVELAND OH 44113-4817	3033 WEST 44TH STREET CLEVELAND OH 44113-4817

## **FILED** May 01 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address 3033 WEST 44TH STREET CLEVELAND OH 44113-4817		4 1001100 3110 (0101 01111 00111 00111 00111 00111 00111 00111 00111 00111 00111				
3033 WEST 44 CLEVELAND O								
					3. Date Incorporated or Qualified 06/16/1995	1	e of Las <b>3/199</b> (	t Report
	Place of Business	2a. Mailing Address			4. FLI Number			Applied For
21		26			34-1249292			Not Applicable
Sulte, Apt.	#, etc.	Surte, Apt. #, etc.			5. Certificate of Status Desired	K)		5 Additional Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be				
23		28		Trust Fund Contribution				
Zip	Country	Zip Countr			6. This corporation has liability for intengible tax under s. 19: Florida Statutes ☐ Yes 【 No			r s. 199.032,
24	9. Name and Address of Curren		30		Florida Statutes  10. Name and Address of New Reg		<del>-</del>	
U O		. Itegratered Agent	81	Name	IV. Halle bit Address of New Ne	JISTOICU A	Seur	
	SKINS, TERRY							····-
	n.e. 14th street Ala Fl 34470	82	Street Add	Address (P.O. Box Number is Not Acceptable)				
00	*LA FL 344/U		83					
							<del></del> -	
			84	City		FL	<b>85</b> Z	ip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607 1508, Florida Statuli	es, the above	ı. e-named <b>c</b> or	rporation submits this statement for the p		 changin	g its registered
office or u	registered agent, or both, in the State implementary with land accord the obligation	of Florida, Such change was a dions of Section 607,0505. Fir	authorized by	the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	t the appo	intment	as registered
i	an tarrina tring and accopy the cringe	tions of occitor our local, the	on the blackets	<b>.</b>				
SIGNATURE	Signature, typed or printed name of registered age	ot and title it applicable (NOT)	: Registered Agr	ent signature requ	uired when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECT	
TITLE	PD	☐ DELETE	1.1 TITLE				Chang	je 🔲 Additior
NAME	HOSKINS, CHRISTOPHER		1.2 NAMÉ					
STREET ADDRESS	3033 WEST 44TH STREET		1.3 STREET	ADDRESS				
CITY-ST-ZIP	CLEVELAND OH		1.4 CITY- S	1 · 21P				
TITLE	VD	☐ DELETÉ	2.1 TITLE				∐ Chang	je 🛄 Additio
NAME	HOSKINS, TERRY		2.2 NAME					
STREET ADDRESS	3033 WEST 44TH STREET		2.3 STREET	ADDRESS				
CITY-ST-ZIP	CLEVELAND OH		2 4 CHY-5	31 - ZIP			<b>—</b>	
TITLE	VD	LJ DELETE	3 1 TITLE				Chang	je Additio
NAME	HOSKINS, KENNETH		3.2 NAME					
STREET ADDRESS	3033 WEST 44TH STREET		3.3 STREE1					
CITY-ST-ZIP	CLEVELAND OH	DELETE	3.4. CITY-5	S1 - 7IP			T 05	A A A A A A A A A A A A A A A A A A A
TITLE	STD CHADON	☐ DELETE	4.1 111LE				Chang	ge Addition
NAME	HOSKINS, SHARON 3033 WEST 44TH STREET		4. 2 NAME					
STREET ADDRESS	CLEVELAND OH		4.3 STREFT					
CITY-ST-ZIP	CD CD	DELETE	4.4 CITY - S	1 - 710			Chang	e 🔲 Add:tion
TITLE NAME	HOSKINS, RICHARD P	L_ VIIII	5 1 TITLE			I		ie 🗀 Woo-dot
	3033 WEST 44TH STREET		5.2 NAME	*DOD( 00				
STREET ADDRESS	CLEVELAND OH		5.3 STHEET	i				
CITY-ST-ZIP TITLE	STD	DELETE	54 CITY - S 61 TITLE	1-4  2			Chang	je 🔲 Addition
	ROLL, FLORENCE	[_] Officit				,	unany	io Ti Manillilli
NAME	3033 WEST 44TH ST		6.2 NAME					
STREET ADDRESS	CLEVELAND OH		6.3 STREET	i				
CITY-ST-ZIP		Luith this films dose not avail	64 CITY-S		ed in Section 119.07(3)(i). Florida Statutes	. I fuelbas	porlife il	at the
					ao io secoon il 19 da 300 Elonga Statuta	. LUCTOR	COUNTY	DOLUMENT CO.

information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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 area; himment with an address.