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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F95000002910 (6)

TRU-CO., INC.

**FILED** Mar 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					-		0   20   167	
3033 WEST 4		•	3033 WEST 44TH STREET					
CLEVELAND OH 44113-4817		CLEVELAND OH 44113-4817						
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 06/16/1995		
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For
21		26				34-1249292		Not Applicable
Suite, Apt.	#, <b>9</b> 10.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27					-	Required
City & State	•	City & State				6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country	Zip Country				8. This corporation owes or has paid the current year intangible		
24	25	29 30				Personal Property Tax due June 30.  Yes X No		
9, Name and Address of Current Registered Agent						10. Name and Address of New Registered	J Agent	
HOSKINS, TERRY				81	Name			
540 N.E. 14TH STREET				82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
OCALA FL 34470				B3	200			
				63				ļ
				84	City	Fi	85 Zi	p Code
## Duray out !	to the provinces of Costions 607 050	and 607 1509 Florida Statut	or the a	hove	-named corns	pretion submits this statement for the purpose	of changing	its registered
office or re	onistered agent or both in the State.	of Florida. Such change was a	the corporatio	on's board of directors. I hereby accept the ap	pointment a	as registered		
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Sloredure, typod or printed name of registered agent and title if applicable. (NOTE: Registere					nt signature required	d when reinstating) DATE		
12.	7. OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	
TITLE	P:0	☐ DELETE	DELETE 1.5 TI				Change	Addition
NAME	HOSKINS, CHRISTOPHER			AME				
STREET ADDRESS			TREET	ADDRESS			Į:	
CITY-ST-ZIP	CLEVELAND OH	T NECTO	1.4 CI		T- ZIP		Change	e Addition
TITLE	VO HOCKING TEDDY	DELETE 2.11					L Change	E LI MOUNDA
NAME	HOSKINS, TERRY 3033 WEST 44TH STREET		2.2 N					
STREET ADDRESS	CLEVELAND OH		2.3 STREE 2. 4 CITY					1
CITY-ST-ZIP TITLE	VD DELETE 3.1T			11-211		Change	Addition	
NAME	HOSKINS, KENNETH		3.2 N					
STREET ADDRESS	8033 WEST 44TH STREET				ADDRESS			Į.
CITY-ST-ZIP	CLEVELAND OH			ITY-S				
TITLE	810	DELETE.	4.1 TI				Change	Addition
NAME	HOSKINS, SHARON		4.21	AME				Ì
STREET ADDRESS	8033 WEST 44TH STREET		4.3 S	TREET	ADDRESS			
CITY-ST-ZIP	CLEVELAND OH		4.4 C	ITY-\$	T-ZIP			
TITLE	CD	DELETE	5.1 TI	TLE			Change	e L. Addition
NAME	HOSKINS, RICHARD P		5.2 N					ļ
STREET ADDRESS	3033 WEST 44TH STREET				ADDRESS			]
CITY-ST-ZIP	CLEVELAND OH	DELETE	_	TY- 5	T-ZIP		☐ Change	e
TITLE	STD ROLL, FLORENCE	<u>וו</u> ענונונ	6.1 Ti					- L Roution
NAME	3033 WEST 44TH ST		6.2 NAME		4DDDCCC			ļ
STREET ADDRESS	CLEVELAND OH				ADDRESS			]
CITY-ST-ZiP			ITY-S		Section 119 07/3\(i) Florida Statutes   further of	cortify that t	he information	

Indicated on this annual report or supplied with rins hing does not quality for the exemption stated in section 119.07(3)(), Florida Statutes. 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 conforation 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 charged, or on an attachment with appendixes.