## FILED 2000 UNIFORM BUSINESS REPORT (UBR) May 04, 2000 8:00 am Secretary of State **DOCUMENT # G50108** 05-04-2000 90037 001 \*\*\*600.00 TECO TOWING COMPANY Principal Place of Business Mailing Address 🕆 n franklin st 702 N FRANKLIN ST SUITE 900 900 TAMPA FL 33602-4429 AMPA FL 33602 2. Principal Place of Business 3. Mailing Address c/o D. E. SCHWARTZ c/o D. E. SCHWARTZ Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. P.O. BOX 111 702 N FRANKLIN ST Applied For City & State 4. FEl Number City & State 59-2318324 Not Applicable TAMPA FL TAMPA FL Country \$8.75 Additional Zip Zip 5. Certificate of Status Desired US Fee Required 33601-0111 33602-4429 US 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MCDEVITT, S. M. BRESNAHAN, T. M. Street Address (P.O. Box Number is Not Acceptable) 702 N FRANKLIN ST SUITE 900 702 N FRANKLIN ST **TAMPA FL 33602** Zip Code 33602 City FL TAMPA shanging its registered office or registered agent, or both, in the State of Florida. 8. The above name FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. DP Addition ☐ Delete TITLE TITLE RANKIN, D.J. NAME 702 N FRANKLIN ST 702 N FRANKLIN ST #900 STREET ADDRESS STREET ADDRESS TAMPA FL 33602 CITY-ST-ZIP CITY-ST-ZIP TAMPA FL ☐ Addition TD Change TITLE ☐ Delete GILLETTE, G.L. NAME STREET ADDRESS 702 N FRANKLIN ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33602** ☐ Addition □ Change TITLE TITLE **Delete** CRANE, JOHN C NAME NAME STREET ADDRESS 702 N FRANKLIN ST #900 STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TAMPA FL XX Change Addition TITLE ☐ Delete TITLE KOVAC, G.W. NAME NAME 702 N FRANKLIN ST 702 N FRANKLIN ST #900 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA FL 33602 CITY-ST-ZIP **TAMPA FL 33602** TITLE VPD ☐ Delete TITLE XIX Change ☐ Addition BRESNAHAN, TIM BRESNAHAN, T. M. 702 N FRANKLIN ST NAME 702 N FRANKLIN ST #900 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TAMPA FL 33602 TAMPA FL 33602 XIX Change ☐ Addition ☐ Delete TITLE TITLE SCHWARTZ, D.E. NAME NAME STREET ADDRESS 702 N FRANKLIN ST 702 N. FRANKLIN ST., #900 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33602 CITY-ST-ZIP **TAMPA FL 33602** 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

CR2E034 (9/99)