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**

DOCUMENT # G58034

TAMPA	SLAND TRANSIT COMPANY	, INC.							
Principal Place	of Business	Mailing Address				INA ISHIK BINT NIBIH NI	#II #2#II #1#II #II	TIL BIBIT 4881	
424 KNIGHTS RUN AVE. 300 BENEFICIAL CENTER TAMPA FL 33602 PEAPACK NJ 07977 US US					DO NOT V	DO NOT WRITE IN THIS SPACE			
03					3. Date incorporated or Qual	ifed			
ļ					09/02/1983				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	***	Арр	lied For	
27 2700 Sarders Road 26 Dame					51-0284705		Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certifcate of Status Desire	d 🗆	\$8.75 Ac Fee Req		
City & State City & State = 23 Prospect Heights, IL 28					Election Campaign Finance Trust Fund Contribution	ing	\$5.00 N Added to		
Zip Gountry Zip Cou					8. This corporation owes the	current year Inta	angible		
24 (a)	70 25 COOK	29 30	1		Personal Property Tax.			□No	
9. Name and Address of Current Registered Agent					10. Name and Address of N	ew Registered	Agent		
-			81	Name					
CT CORPORATION SYSTEM				Street	et Address (P.O. Box Number is Not Acceptable)				
1200 S. PINE ISLAND ROAD				011001					
PLANTATION FL 33324									
			84	City		FL	85 Zip Ci	ode	
Affice or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	t Florida. Such change was autho	orizea ov	ine com	corporation submits this statement for oration's board of directors. I hereby a	the nurnose of	changing its r ntment as reg	egistered istered	
1	the familiar start, and accept the conger								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Rec	gistered Agen	t signature i	equired when reinstating)	DATE			
12. OFFICERS AND DIRECTORS 13					ADDITIONS/CHANGES TO	OFFICERS AN			
TITLE	PD	DELETE	1.1 TITLE		President 2700 SAI	NDERS ROAD	☐ Change	Addition Addition	
NAME	BROAS, MATTHEW J	THEW J			C. D. GIIMET	PROSPECT HEIGHTS IL 60070			
STREET ADDRESS	ORESS 200 BENEFICIAL CENTER		1.3 STREET ADDRESS		FROSTE	i iiridiii de	. 000/0		
CITY-ST-ZIP	PEAPACK NJ	APACK NJ		Γ-ZIP		1			
TITLE	D	DELETE	2.1 TITLE		Secretary		☐ Change	Addition	
NAME .	CASPERSEN, FINN M.W.	·	2.2 NAME		Secretary L.J. Morris				
STREET ADDRESS	301 N. WALNUT ST.		2.3 STREE	ADDRESS	1	1			
CITY-ST-ZIP	WILINGTON DE		2. 4 CITY-5	T-ZIP					
TITLE	VPSD	DELETE	3.‡ TITLE		Treasurer .		Change	Addition	

6.4 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. CITY-ST-ZIP

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

☐ DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 C/TY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

BROWN, CHARLES D

PEAPACK NJ 07977

MARKS, SUZANNE P

SHERIDAN, PATRICIA

200 BENEFICIAL CENTER

TAMPA FL 33602

PEAPACK NJ

VPTS

424 KNIGHTS RUN AVE.

200 BENEFICIAL CENTER

B.B. MOSS, Jr

m.A. Deluca

Director

Director

5 A. Yozcur

Asst Secretary

R.S. Winder

☐ Change

☐ Change

Change

Addition

Addition

Addition

FILED Apr 16, 1999 8:00 am Secretary of State

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