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 # **H09858**

1. Corporation Name

T. FRED ROCHE, JR. & ASSOCIATES, INC.

	Principal Place of Business
	% T. FRED ROCHE, JR. 123 HOLLY TREE LANE BRANDON FL 33511
	2. Principal Place of Busine
7	Suite, Apt. #, etc.
	City & State

Mailing Address

% T. FRED ROCHE. JR. 123 HOLLY TREE LANE BRANDON FL 33511

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90031 034 ***150.00



DO NOT WRITE IN THIS SPACE

							3. Date incorporated or Qualifed 06/27/1984				
2. Principal Place of Business 2a. Mailing Address							4. FEI Number	Ap	olied For		
21	¬ '						59-2428792	No	t Applicable		
Suite, Apt. #, etc.			_ Suite, Apt. #, etc.				\$8.75 Additional				
22		7			•	5. Certificate of Status Desired Fee Required Fee Required					
City & State City & State							6. Election Campaign Financing		\$5.00	May Be	
23 28							Trust Fund Contribution Added to Fees				
Zip	Со	Zip Country				8. This corporation owes the current year Intangible					
24	25 29						Personal Property Tax. ☐ Yes 🛣 No				
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent				
		· · · · · · · · · · · · · · · · · · ·			81	Name					
ROCHE, BETTY						93 Chart Address (P.O. Bay Number is Not Acceptable)					
	HOLLY TREE LAN	NE .			82 Street Address (P.O. Box Number is Not Acceptable)						
BRANDON FL 33511					83						
					84	City	·	FL Í	35 Zip (Code	
11, Pursuant	to the provisions of	Sections 607.0502 an	d 607.1508, Florid	da Statutes, the	above	-named co	emoration submits this statement for the DUIDOS	e of cha	inging its	registered	
office or r	egistered agent, or	both, in the State of Fl accept the obligations	onda. Such chanc	ge was authoriz	ed by	tne corpora	ation's board of directors. I hereby accept the a	ppointm	ent as re	gistered	
=	irr izitiliizi wici, siid	accept the obligations	, 0., 000.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			;				
SIGNATURE	Signature, typed or printed	name of registered agent and	title if applicable.	(NOTE: Register	ed Agen	t signature requ	ured when reinstating) DAT	Ē			
12.	<u> </u>	OFFICERS AND D	RECTORS	13	3.		ADDITIONS/CHANGES TO OFFICER				
TITLE	P		☐ DE	LETE 1.1	TITLE				Change	Addition	
NAME	ROCHE, T. FRE	D JR.		1.2	NAME		•			}	
STREET ADDRESS	123 HOLLY TRE			1,3	STREET	ADDRESS	•				
CITY-ST-ZIP	BRANDON FL			14	Caty-\$1	-ZIP				1	
TITLE	S		□ DE		TITLE				Change	☐ Addition	
NAME	ROCHE, BETTY			2.2	NAME	-				[
,	123 HOLLY TRE					ADDRESS					
STREET ADDRESS	BRANDON FL		•		CITY-S	-		•		ŀ	
CITY-ST-ZIP TITLE	DIVITORITE		Пр		TITLE	1-21		. [Change	☐ Addition	
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NAME	ļ					ADDRESS				Į	
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NAME					NAME						
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NAME	\					ADDOCCO				ì	
STREET ADDRESS						ADDRESS				ĺ	
CITY-ST-ZIP	ļ <u>-</u>				CITY-ST	-212			Change	Addition	
TITLE			∟ Di		TILE			L	□ cuange		
NAME	ļ				NAME					j	
STREET ADDRESS	\	•				ADDRESS				}	
CITY-ST-ZIP					CITY-S						
4.4 I bosobu	partific that the infact	nation eupplied with th	is filing does not	qualify for the ex	remeti	on etated i	n Section 119.07(3)(i) Florida Statutes, I furthe	r certify	that the i	ntormation	

indicated on this annual report or supplied will also limit 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 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.

SIGNATURE: