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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H17632 (1)

T.P.A., INC.

FILED Feb 09 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address				
% MICHAEL J. PERONTI			% MICHAEL J. PERONTI				
317 BRANTLEY CLUB PLACE			317 BRANTLEY CLUB PLACE		DO NOT WRITE IN THIS S	PACE	
LONGWOOD FL 32779		LONGWOOD FL 3277	LONGWOOD FL 32779		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					08/22/1984	· · · · .	
2. Principal Place of Business 2a. Mailia		2a. Mailing Address	ailing Address		4. FEI Number	 	olied For
21		26			59-2589606		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22		27			·	Fee Re	·
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	
		28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Countr	,	8. This corporation owes or has paid the cur		
24	25	29	30				No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
PERONTI, MICHAEL J.			81	Name			
317		82	82 Street Address (P.O. Box Number is Not Acceptable)				
LO	NGWOOD FL 32779						
			83				
			-	Cin		85 Zip C	`oda
			84	City	FL	85 Zip C	Jode
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1508. Florida Sta	atutes, the abov	e-named corp	oration submits this statement for the purpose of ion's board of directors. I hereby accept the app	changing its	registered
office or re	egistered agent, or both, in the State	of Florida, Such change w	as authorized b	y the corporati	ion's board of directors. I hereby accept the app	ointment as r	registered
agent. i az	m ramiliar with, and accept the oblig	pations of, dection 607.0000	, Florida Statute	٥.			
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if spolicable /	NOTE: Registered Ag	ent signature require	ed when reinstating) DATE		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	3 IN 12
TITLE	DP	DELETE	1.1 TITLE	T.		Change	Addition
NAME	PERONTI, MICHAEL J.	1.2 N					
STREET ADDRESS	047 PRANTEY OLUP DI ACE			T ADDRESS			
	LONGINGOD FI		1.4 CITY-				
CITY - ST - ZIP	D	DELETE	2.1 TITLE	31-21		Change	Addition
	PERONTI, CAROLYN	-]		_ •	_
NAME			2.2 NAME				1
STREET ADDRESS	LONGINOOD ET			r address			
CITY-ST-ZIP			2, 4 CITY-	ST-ZIP		Change	Addition
TITLE		☐ DELETE	3.1 TITLE	1		change	T vogitois
NAME			3.2 NAME	1			
STREET ADDRESS				T ADDRESS			
CiTY - ST - ZiP			3.4. CITY-	ST-ZIP		1 105	1 April -
TITLE		DELETE	4.1 TITLE			L Change	Addition
NAME			4, 2 NAME	j			
STREET ADDRESS			4.3 STREE	F ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	1		☐ Change	Addition
NAME			5.2 NAME	- [
STREET ADDRESS			5.3 STREE	F ADDRESS	- · · · · · · · · · · · · · · · · · · · · · 		
CITY - ST - ZIP			5.4 CITY-	ST-ZIP	· ·		
TITLE	<u> </u>	DELETE	6.1 TITLE			☐ Change	Addition
NAME		_	6.2 NAME				ļ
STREET ADDRESS							
I SINCELADURESS I			E G Q CTDEE				
CITY-ST-ZIP			6.3 STREE				

Indicated on this annual report or supplied with his limit does not qualify in the exemption stated in Section 119.07(5)(f), Florida Statutes. Indicate in 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.

407-788-0832