FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

H19867

DOCUMENT # H198
1. Corporation Name
NORDLIE - TAMPA BAY, INC.

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Principal Place of 1207 MARIE TAMPA FL : US	STREET	Maiing Address PO BOX 990 - BANDON FL 33509 US-				3. Date legan or a Qualified 09/06/1984	3a. Date		
2. Principal Place 21	ce of Business	2a. Mailing Address 26 1207 Mat	ie S	भ	eét	4. FEI Number 1590339			Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & State		City & State 28 Tampa, F	L			Election Campaign Financing Trust Fund Contribution			0 May Be ed to Fees
Zip 24	Country 25	29 33607	Cou 30	ntry		8. This corporation has liability for in Florida Statutes	□No		199.032,
	9, Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Ro	egistered A	gent	
BENTS	ON, CHRIS			01	Name				
1207 M	iarie street			82	Street Addre	ess (P.O. Box Number is Not Acceptabl			
IAMPA	FL 33607			83				•	
				84	City		FL	85 Z	ıp Code
familiar with SIGNATURE S 12. TITLE NAME	n, and accept the obligations of, Sciotic signature, typed or printed name of registered agent a OFFICERS AND NORDLIE, JAMES O. 450 TOOTING LANE	on 607.0505, Florida Statutes.	13.	Agen TLE ME	t signature required	d of directors. I hereby accept the appointment of the directors of the di	DATE CERS AND		
STREET ADDRESS CITY-ST-ZIP	BIRMINGHAM MI		1.3 ST 1.4 CI		ADDRESS 1-21P				
NAME STREET ADDRESS CITY-ST-ZIP	ADDSION, THOMAS G. 6946 AURORA TROY MI	DELETE	2 11 2.2 N/ 2 3 S1 2 4 CI	AME IREET	ADDRESS		Ē.) Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST SMITH, KEVIN F. 11536 CHEROKEE LANE BRECKSVILLE OH	☐ DELETE	3.1 T 3.2 N/	ITLE AME TREET	ADORESS		C.] Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		□ DELETE	4. 1 T 4.2 N/	TLE AME TREET	ADDRESS		C] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5. 1 T 5.2 N 5.3 SI	TLE AME IREET	ADDRESS 1-71P			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		• DEFEIE	6 1 T 6 2 N 6 3 SI 6 4 CI	ITLE AME IREET	ADDRESS	or the exemption stated in Section 119.0] Change	Addition

Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

GNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

SIGNATURE: __