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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 14 AM 9:09

DOCUMENT # H34238

(6)

1. Corporation Name

TAB INVESTMENTS, INC.

Principal Place of Business

**101 N. PLUMOSA STREET
P.O. BOX 540548
MERRITT ISLAND FL 32954-0548**

Mailing Address

**101 N. PLUMOSA STREET
P. O. BOX 540548
MERRITT ISLAND FL 32954-0548**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/14/1984

3a. Date of Last Report

04/27/1994

4. FEI Number

59-2505704

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 101 NORTH PLUMOSA STREET

2a. Mailing Address

26 POST OFFICE BOX 540548

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 MERRITT ISLAND, FLORIDA

27 City & State

28 MERRITT ISLAND, FLORIDA

24 Zip

32953

Country

25 U.S.

29 Zip

32954-0548

Country

30 U.S.

9. Name and Address of Current Registered Agent

**ADAMS DOROTHY E
101 N PLUMOSA ST
P. O. BOX 540548
MERRITT ISLAND FL 32953**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROWE, MORRIS A.
STREET ADDRESS	690 RANGE ROAD
CITY - ST - ZIP	COCOA FL
TITLE	VT
NAME	HAID, SUSAN E.
STREET ADDRESS	101 N PLUMOSA ST
CITY - ST - ZIP	MERRITT ISLAND FL
TITLE	VS
NAME	ADAMS, DOROTHY E.
STREET ADDRESS	101 N PLUMOSA ST
CITY - ST - ZIP	MERRITT ISLAND FL
TITLE	P
NAME	KING, MAXWELL
STREET ADDRESS	1384 WALTON HEATH COURT
CITY - ST - ZIP	ROCKLEDGE FL
TITLE	VP
NAME	LUTHER, ROBERT A
STREET ADDRESS	101 N PLUMOSA STREET
CITY - ST - ZIP	MERRITT ISLAND FL
TITLE	V
NAME	NOWLIN, CYNTHIA A.
STREET ADDRESS	101 N PLUMOSA STREET
CITY - ST - ZIP	MERRITT ISLAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	220 KING STREET
1.4 CITY - ST - ZIP	COCOA, FLORIDA 32922
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	V
2.3 STREET ADDRESS	PARKER, MARY P.
2.4 CITY - ST - ZIP	MERRITT ISLAND, FL 32953
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	V/S/T
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	MERRITT ISLAND, FL 32953
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	C
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	ROCKLEDGE, FL 32955
5.1 TITLE	☒ Change ☒ Addition
5.2 NAME	P/D
5.3 STREET ADDRESS	BOWDEN, DONALD L.
5.4 CITY - ST - ZIP	MERRITT ISLAND, FL 32953
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	MERRITT ISLAND, FL 32953
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE:

Dorothy E. Adams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DOROTHY E. ADAMS, VICE PRESIDENT

4/11/95
Date

(407) 452-5480
Telephone Number

H34258

TAB INVESTMENTS, INC.
1995 CORPORATION ANNUAL REPORT
ATTACHMENT - ADDITIONS/CHANGES
at #12

ADDITIONAL OFFICERS

VICE PRESIDENT

WALL, PATRICIA A.
101 N. PLUMOSA ST.
MERRITT ISLAND, FL 32953

ADDITIONAL DIRECTORS

GIOIA, G. LEONARD
255 Fortenberry Road
MERRITT ISLAND, FL 32952

KAY, SEBRON E.
307 Magnolia Avenue
MERRITT ISLAND, FL 32952