

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Secretary of State
Division of Corporations

APPROVED
AND
FILED

95 MAY -1 PM 5:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # ~~116159~~ **H96159**
D.B.M. DEVELOPMENTS OF PINELLAS, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/28/1986	3a. Date of Last Report 04/20/94
4. FEI Number 59-27-14060	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	

Mailing Address
100-Second-Avenue-South-
Suite-1202
St.-Petersburg,-Fl-33701-
100-Second-Avenue-South-
Suite-1202-
St.-Petersburg,-Fl--33701

2. Principal Office Location c/o Roy G. Harrell, Jr. 21 Barnett Tower, 23rd Floor Suite, Apt. #, etc. 22 200 Central Avenue City & State 23 St. Petersburg, FL 33701 Zip 24 33701 Country 25 USA	2a. Mailing Address c/o Roy G. Harrell, Jr. 26 Barnett Tower, 23rd Floor Suite, Apt. #, etc. 27 200 Central Avenue City & State 28 St. Petersburg, FL 33701 Zip 29 33701 Country 30 USA
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9. Name and Address of Current Registered Agent

William-F.-Baynard,-Jr-
100-Second-Avenue-South-12th-Floor
St.-Petersburg,-Fl--33701-06

10. Name and Address of New Registered Agent

81 Name Roy G. Harrell, Jr.
82 Street Address (P.O. Box Number is Not Acceptable) Barnett Tower, 23rd Floor
83 200 Central Avenue
84 City St. Petersburg
85 Zip Code FL 33701

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]

NOTE: Registered Agent signature required when registering.

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D/P	NAME Saltsman, Debra	1.1 TITLE Change ☐ Addition ☐	600001476556
STREET ADDRESS 95 St. Claire Avenue W.	STREET ADDRESS 95 St. Claire Avenue W.	1.2 NAME Change ☐ Addition ☐	-05/05/95--01007--009
CITY, ST, ZIP Toronto, Ontario, Canada	CITY, ST, ZIP Toronto, Ontario, Canada	1.3 STREET ADDRESS Change ☐ Addition ☐	****200.00 ****200.00
TITLE D/S/T	NAME GORMAN, BEVERLY	2.1 TITLE Change ☐ Addition ☐	
STREET ADDRESS 95 St. Claire Avenue	STREET ADDRESS 95 St. Claire Avenue	2.2 NAME Change ☐ Addition ☐	
CITY, ST, ZIP Toronto, Ontario, Canada	CITY, ST, ZIP Toronto, Ontario, Canada	2.3 STREET ADDRESS Change ☐ Addition ☐	
TITLE V	NAME GORMAN, HARRY	2.4 CITY, ST, ZIP Change ☐ Addition ☐	
STREET ADDRESS 95 St. Claire Ave. W.	STREET ADDRESS 95 St. Claire Ave. W.	3.1 TITLE Change ☐ Addition ☐	
CITY, ST, ZIP Toronto, Ontario, Canada	CITY, ST, ZIP Toronto, Ontario, Canada	3.2 NAME Change ☐ Addition ☐	
TITLE	NAME	3.3 STREET ADDRESS Change ☐ Addition ☐	
STREET ADDRESS	STREET ADDRESS	3.4 CITY, ST, ZIP Change ☐ Addition ☐	
CITY, ST, ZIP	CITY, ST, ZIP	4.1 TITLE Change ☐ Addition ☐	
TITLE	NAME	4.2 NAME Change ☐ Addition ☐	
STREET ADDRESS	STREET ADDRESS	4.3 STREET ADDRESS Change ☐ Addition ☐	
CITY, ST, ZIP	CITY, ST, ZIP	4.4 CITY, ST, ZIP Change ☐ Addition ☐	
TITLE	NAME	5.1 TITLE Change ☐ Addition ☐	
STREET ADDRESS	STREET ADDRESS	5.2 NAME Change ☐ Addition ☐	
CITY, ST, ZIP	CITY, ST, ZIP	5.3 STREET ADDRESS Change ☐ Addition ☐	
TITLE	NAME	5.4 CITY, ST, ZIP Change ☐ Addition ☐	
STREET ADDRESS	STREET ADDRESS	6.1 TITLE Change ☐ Addition ☐	
CITY, ST, ZIP	CITY, ST, ZIP	6.2 NAME Change ☐ Addition ☐	
		6.3 STREET ADDRESS Change ☐ Addition ☐	
		6.4 CITY, ST, ZIP Change ☐ Addition ☐	

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)(k), Florida Statutes. I further certify that the information obligated 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:

[Signature]
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

(Signature Please)

April 20/95 4:13-267-5191