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

PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State

FILED Sep 08 1997 8:00am Secretary of State

	1997	9	DIVISION OF	CONFORM	HONS		50010			S cac	_
DOCU 1. Corporation	MENT # 5	344	155								
TREE CORPORATION OF AMERICA							AMENDED REPORT				
11112	SORT OWNITION OF WIENER	JA.						<u> </u>			
Principal Plac	ce of Business	Mailing	Address	<u>_</u>							
3829 F	RODEO RD	P O	BOX 9								
	FL 32619		FL 32619)		- 1					
							6 Data la	1.5			_
9 Principal I	Place of Business	T 00 Mail					3. Date Incorporated or Qualified 1/26/87		e of Last I 14/97	Report	
21 26			2a. Mailing Address			4. FEI Number 59-2758568			pplied For	4	
Suite, Apt	. #, elc.		, Apl. #, etc.						\rightarrow \leftarrow	ot Applicable Additional	-
22		27					5. Certificate of Status Desired		•	Auditionar lequired	
City & Sta	lo	City	& State				6. Election Campaign Financing		\$5.00	May Be	_
23		28					Trust Fund Contribution			to Fees	
Zip	Country	Zip		Coun	try	1	8. This corporation has liability for			s. 199.032	7
24	25 9. Name and Address of Current	29 Pagislared	Agent	[30]			Florida Statutes 10. Name and Address of New Re	Yes _			↲
		nogiate eo	Agent		1 Name			gistered A	gent		-
WILLIAM H. JOHNSON MARK A.						GLUCKMAN					
8801 NINTH ST N ST. PETERSBURG FL 33702 82 Street Addr 3829 RO						l Addres 9 ROT	s (P.O. Box Number is Not Accepta DEO RD	ble)			
51. FE	ALEKSBURG PL 33702			E	3	- 1102					-
					4 0					·	
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11. Pursuant	to the provisions of Sections 607,0502	and 607.00	08. Floriva Statut	es, the abo	ve-name	d corpora	ation submits this statement for the	ourpose of o	hanging i	ts registered	┨
agent. I a	to the provisions of Sections 607,0502 registered agent, or both, in the State of am fan dar wift, and accopt the orligat	ions of, Sec	ion 607. 95 05, Fi	autriorized orida Statul	by the col es.	rporation	is board of directors. I hereby acce	pt the appo	intment as	registered	
SIGNATURE			WHU				9)(2107	7		
12.	Signalu VA day printed in the of registered agriculture of the printed in the of registered agriculture of the printed in the officers and the printed in the officers and the o				igent signalur	re required v	when reinstating)	JATE			
TITLE	T	DIRECTORS	X DELETE	13.		To.	ADDITIONS/CHANGES TO OFFI		DIRECTOR Change		96/6
NAME	DT		Lig office	1.2 NAM		и Итск	S, DAVID	L	criainge	X Addition	6
STREET ADDRESS	JOHNSON, WILLIAM H. 8801 NINTH ST N ST PETERSBURG FL 33						68TH AVE N				CR2F034
CITY-ST-ZIP	ST PETĒRSBUKG FL 33	702		1.4 CITY		PINE	LLAS PARK FL 33781				IF.
TITLE	DPS		DELETE	2.1 TITLE	***************************************	VP			Change	X Addit on	님
NAME	GLUCKMAN, MARK A. 3829 RODEO RD	•		2.2 NAM	E	MOOR	E, MICHAEL D.		_ •		
STREET ADDRESS	BELL FL 32619			2.3 STRE	ET ADDRESS	3829	RODEO RD				
CITY-ST-ZIP				2 4 CITY	- ST - ZIP	BELL	FL 32619				
TITLE	AS		D ELETÉ	3 1 TITLE				ľ	Change	Addition	1
NAME	JOHNSON, BRENDA L.			3 2 NAM							
STREET ADDRESS	ST PETERSBURG FL 33	702			ET ADDRESS	1					
CITY-ST-ZIP TITLE	VP,T	· - -	DELETE	3.4. CITY 4.1 TITLE		 			Channa	1 deliver	┨
NAME	GLŰČKMAN, MILLIE D.			4 2 NAM				L	Change	Addition Addition	
STREET ADDRESS	3829 RODEO RD				LT ADDRESS						
CITY-ST-ZIP	BELL FL 32619			4.4 CITY							
TITLE			DELETE	5.1 TITLE					Change	Addition	1
NAME				5.2 NAME		i			'n	My ~	
STREET ADDRESS				5.3 STRE	1 ADDRESS				1	J, "\Y, ,	1
CITY-ST-ZIP				5 4 CITY	SI-ZIP	<u></u>	·		•	$^{\prime\prime}$	ſ
TITLE			DELETE	611111					Change	ncitibbA 🔝	1
NAME				6.2 NAME			90000221 -09/09/97011	ജിജിഷ് വിവ	번 년 20		
STREET ADDRESS					1 ADDRESS		-03/03/3(8H	J4.5==U	űb		1
14. Ldo beret	av certify that the information supplied	with this filing	i done not qualif	6.4 CITY	ST-7IP	lalod is	***61.25	. 11	- 34		
informatio	by certify that the information supplied in indicated on this angual report or su	oplemental a	nnual report is tr	y ioi ine ex ue and acc	empiion s curate and	siaieu ili 3 that my	ouchorr (19.07(3)(I), Florida Statute r signature shall have the same loga	s. I Turther C	ertity that	the	1

tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: