

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

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95 MAY 11 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # J76182

(1)

1. Corporation Name

TAMPA BAY NOTICE SERVICES, INC.

Principal Place of Business
4332 69TH AVENUE
PINELLAS PARK FL 34665-5810

Mailing Address
4332 69TH AVENUE
PINELLAS PARK FL 34665-5810

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/29/1987	3a. Date of Last Report 05/26/1994
4. FEI Number 59-2827835	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	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip	29 Zip
25 Country	30 Country

9. Name and Address of Current Registered Agent

HARRIS, RANDY
4332 69TH AVENUE
PINELLAS PARK FL

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 607.04(1) and 607.15(8), Florida Statutes, this 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 this appointment as registered agent. I am familiar with and consent to the provisions of Sections 607.04(1) and 607.15(8), Florida Statutes.

SIGNATURE

Randy Harris

By: Registered Agent or authorized representative

5-5-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1. TITLE	☐ Change ☐ Addition
NAME	HARRIS, RANDY	1. NAME	
STREET ADDRESS	4332 69TH AVENUE	1. STREET ADDRESS	
CITY & STATE	PINELLAS PARK FL	1. CITY & STATE	☐ Change ☐ Addition
TITLE		2. TITLE	
NAME		2. NAME	
STREET ADDRESS		2. STREET ADDRESS	
CITY & STATE		2. CITY & STATE	☐ Change ☐ Addition
TITLE		3. TITLE	
NAME		3. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY & STATE		3. CITY & STATE	☐ Change ☐ Addition
TITLE		4. TITLE	
NAME		4. NAME	
STREET ADDRESS		4. STREET ADDRESS	
CITY & STATE		4. CITY & STATE	☐ Change ☐ Addition
TITLE		5. TITLE	
NAME		5. NAME	
STREET ADDRESS		5. STREET ADDRESS	
CITY & STATE		5. CITY & STATE	☐ Change ☐ Addition
TITLE		6. TITLE	
NAME		6. NAME	
STREET ADDRESS		6. STREET ADDRESS	
CITY & STATE		6. CITY & STATE	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 111.07(2)(b), Florida Statutes. Further, I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall serve this notice (except after I am it made under oath) that I am available or on three for of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 1807, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Randy Harris

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

5-5-95

813-526-9432