

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J97368

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** TECO DIVERSIFIED, INC.

**Current Principal Place of Business:**

702 N FRANKLIN ST.  
TAMPA, FL 336020110 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 111  
TAMPA, FL 33601 US

**New Mailing Address:**

**FEI Number:** 59-2866560      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ATTAL, C.A. III  
702 N FRANKLIN ST  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ATTAL, C. A. III  
Address: 702 N. FRANKLIN STREET  
City-St-Zip: TAMPA, FL 33602

Title: DP  
Name: RAMIL, J. B.  
Address: 702 N. FRANKLIN STREET  
City-St-Zip: TAMPA, FL 33602

Title: S  
Name: SCHWARTZ, D E  
Address: 702 N. FRANKLIN STREET  
City-St-Zip: TAMPA, FL 33602

Title: DV  
Name: CALLAHAN, S.W.  
Address: 702 N. FRANKLIN ST.  
City-St-Zip: TAMPA, FL 33602

Title: T  
Name: CARUSO, K. M.  
Address: 702 N. FRANKLIN ST.  
City-St-Zip: TAMPA, FL 33602

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID E SCHWARTZ

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04/20/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date