


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

APPROVED
AND
FILED

57 MAY 12 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # J97378 (0)					
1. Corporation Name TERMCO, INC.					
Principal Place of Business MR.H. KESSEL 702 N. FRANKLIN ST. TAMPA FL 33602-4418 US			Mailing Address MR.H. KESSEL PO BOX 111 TAMPA FL 33601-0111 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/15/1987	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		3a. Date of Last Report 05/01/1996	
22 City & State		27 City & State		4. FEI Number 59-2866562	
23 Zip		28 Zip		Applied For <input type="checkbox"/> Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent MCDEVITT, S M 702 NORTH FRANKLIN ST TAMPA FL 33602			10. Name and Address of New Registered Agent		
81 Name			82 Street Address (P.O. Box Number is Not Acceptable) 700002178577--2		
83			84 City FL		
85 Zip Code			86		
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
PD	WADSWORTH, M. F.	702 N. FRANKLIN STREET	TAMPA FL	1.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
				1.2 NAME	
				1.3 STREET ADDRESS	
				1.4 CITY- ST- ZIP 33602	
S	KESSEL, R H	702 N. FRANKLIN STREET	TAMPA FL	2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
				2.2 NAME	
				2.3 STREET ADDRESS	
				2.4 CITY- ST- ZIP 33602	
VD	PORTER, T L	702 N FRANKLIN ST	TAMPA FL	3.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
				3.2 NAME	
				3.3 STREET ADDRESS	
				3.4 CITY- ST- ZIP 33602	
TD	OAK, A D	702 N FRANKLIN ST	TAMPA FL	4.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
				4.2 NAME	
				4.3 STREET ADDRESS	
				4.4 CITY- ST- ZIP 33602	
AS	KICKLITER, JOEY A.	702 NORTH FRANKLIN STREET	TAMPA FL	5.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
				5.2 NAME	
				5.3 STREET ADDRESS	
				5.4 CITY- ST- ZIP 33602	
				6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
				6.2 NAME	
				6.3 STREET ADDRESS	
				6.4 CITY- ST- ZIP	
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: R. H. Kessel, Secretary 4/28/97 (813) 228-4218					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034 (9/96)