

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K04998 (6)

1. Corporation Name

GREGG & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

710 CORAL REEF DRIVE
P.O. BOX 49005
TAMPA FL 33602
US

NEW
7

710 CORAL REEF DRIVE
P.O. BOX 49005
TAMPA FL 33602
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1990

3a. Date of Last Report

02/23/1994

2. Principal Place of Business

2a. Mailing Address

21 1115 N. LAKESHORE BLVD

26 1115 N. LAKESHORE BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 HOWEY-IN-THE-HILLS FL

28 HOWEY-IN-THE-HILLS FL

Zip

Country

Zip

Country

24 34737

25 USA

29 34737

30 USA

4. FEI Number

58-1763139

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

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREGG, MARLENE B

710 CORAL REEF DRIVE 1115 N LAKESHORE BLVD

TAMPA FL 33602 HOWEY IN THE HILLS FL 34737

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 607.0502 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 (typed or printed name of registered agent and how it is changed)

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

PD

GREGG, MARLENE B

710 CORAL REEF DR

TAMPA FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

VS

GREGG, GINGER

1010 NORMANDY TRACE ROAD

TAMPA FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

PD

MARLENE B. GREGG

1115 N LAKESHORE BLVD

HOWEY-IN-THE-HILLS FL 34737

☒ Change ☐ Addition
ADDRESS ONLY

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

VS

GREGG, GINGER

1115 N LAKESHORE BLVD

HOWEY-IN-THE-HILLS FL 34737

☒ Change ☐ Addition
ADDRESS ONLY

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 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 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

(Signature Printed Name)

4-11-95

904-324-2525