

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

FILED

Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K41754** (8)
1. Corporation Name
SPECIALIZED TRANSPORT OF TAMPA BAY, INC.

Principal Place of Business

% BOBBY L. WEBB
5614 E. POWHATAN AVE.
TAMPA FL 33610
US

Mailing Address

% BOBBY L. WEBB
2975 N. TROPICAL TRL.
MERRITT ISLAND FL 32953
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/28/1988

4. FEI Number

59-2915972

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

WEBB, BOBBY L.
2975 N. TROPICAL TRAIL
MERRITT ISLAND FL 32953

10. Name and Address of New Registered Agent

81 Name

Bobby L. Webb

82 Street Address (P.O. Box Number is Not Acceptable)

6 Indrio Blvd.

83

84 City

Indian Harbor Beach

FL

85 Zip Code

32937

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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME WEBB, BOBBY L.
STREET ADDRESS 2975 N. TROPICAL TRAIL
CITY-ST-ZIP MERRITT ISLAND FL

TITLE ☒ DELETE

D
NAME WEBB, REBECCA S.
STREET ADDRESS 2975 N. TROPICAL TRAIL
CITY-ST-ZIP MERRITT ISLAND FL

TITLE ☐ DELETE

D
NAME LARRY, LA MARCUS W.
STREET ADDRESS 808 WINDSOR CT
CITY-ST-ZIP BRANDON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

D
NAME WEBB, BOBBY L.
STREET ADDRESS P.O. BOX 4144 N/A
CITY-ST-ZIP Patrick AFB, FL 32925

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 this filing.

SIGNATURE:

Bobby L. Webb

2/19/98

(407) 779-1311

CR2E034 (1097)