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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(DO NOT WRITE IN THIS SPACE)

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Jeffrey B. Martinez
Secretary, Florida
Tallahassee, Florida 32399-0001

DOCUMENT # K74254 (9)
To Corporation Name:
EQUITY CORPORATION OF PASCO COUNTY, INC.

Principal Place of Business: **50 N. LAURA ST., 9TH FL. BARNETT TOWER, MC 099-000-0930 1812 JACKSONVILLE FL 32202**
Mailing Address: **50 N. LAURA ST., 9TH FL. BARNETT TOWER, MC 099-000-0930 1812 JACKSONVILLE FL 32202**

2. Principal Place of Business: **21** State: **Ap. # etc.** **22** City & State: **23** City: **24** State: **25** City: **26** Mailing Address: **27** State: **Ap. # etc.** **28** City & State: **29** City: **30** State:

3. Date Incorporated or Qualified: **03/21/1989** 3a. Date of Last Report: **04/20/1994**
4. FID Number: **59-2940260** 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**
7. This corporation has liability for delinquent tax under § 190.132, Florida Statutes: ☒ Yes ☐ No **on consolidated**

9. Name and Address of Current Registered Agent
HEAD, JAMES A
50 N. LAURA STREET, BARNETT TOWER, MC 099-000-0930 099-000-1812 JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent **basib**
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 607.0802 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 hereby accepting the responsibility for the corporation's compliance with the provisions of Chapter 607, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS
V
NAME: **KRAMER, WILLIAM G**
STREET ADDRESS: **1000 CENTURY PARK DR., MC299-200-58 TAMPA FL**
NAME: **DSTV**
STREET ADDRESS: **HEAD, JAMES A**
50 N. LAURA ST. MC099-000-0930 JACKSONVILLE FL
NAME: **DP**
STREET ADDRESS: **MILLER, ROBERT F JR**
50 N. LAURA ST. MC099-000-1830 JACKSONVILLE FL
NAME: **DASV**
STREET ADDRESS: **JARBOE, LLOYD ALLEN JR**
50 N. LAURA ST. MC099-000-1830 JACKSONVILLE FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS, IF ANY
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
NAME: ☒ Change ☐ Addition
STREET ADDRESS: **50 N. LAURA STREET MC 099-000-1812**
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
NAME: ☐ Change ☒ Addition
STREET ADDRESS: **V**
AKINS, ROY R.
1000 CENTURY PARK DRIVE 4th Floor
TAMPA, FL 33607

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the corporation's status as a "passive" corporation under Chapter 607, Florida Statutes. I further certify that the information supplied on this filing is true and accurate and that my signature shall have the same legal effect as if I had signed it. I am hereby accepting the responsibility for the corporation's compliance with the provisions of Chapter 607, Florida Statutes, and that my name appears on the list of officers and directors of the corporation as required by Chapter 607, Florida Statutes, and that my name appears on the list of officers and directors of the corporation as required by Chapter 607, Florida Statutes.

SIGNATURE: _____
DIRECTOR, SECRETARY, TREASURER AND VICE PRESIDENT

James A. Head (904) 791-5275
4/5/95