FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **L33992** **(3)**

1. Corporation Name

RUMMEL/54TH AVENUE SOUTH, INC.

Principal Place of Business	Mailing Address
5401 CENTRAL AVENUE **ST. PETERSBURG FL 33710-8049**	**5401 CENTRAL AVENUE** **ST. PETERSBURG FL 33710-8049**

2. Principal Place of Business
21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 County 25

2a. Mailing Address
26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 County 30

3. Date Incorporated or Qualified: **12/05/1989**

3a. Date of Last Report: **06/13/1995**

4. FEI Number: **59-3017353** ☐ 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 has liability for unrigible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

H.E. RUMMEL
5401 CENTRAL AVE
ST. PERERSBURG FL 33710

10. Name and Address of New Registered Agent

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 607.1622, 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. Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: H.E. Rummel 4/1/96
Signature of Registered Agent — Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	RUMMEL, H.E.	
STREET ADDRESS	5401 CENTRAL AVENUE	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	TD	☒ DELETE
NAME	RUMMEL, KATE C.	
STREET ADDRESS	5401 CENTRAL AVENUE	
CITY-ST-ZIP	ST. PETERSBURG 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		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS (IN '96)

11 TITLE	VSD	☒ Change ☐ Addition
12 NAME	NICHOLS, KATE	
13 STREET ADDRESS	1682 OCEANVIEW DR	
14 CITY-ST-ZIP	TIERRA VERDE, FL	
21 TITLE	TD	☒ Change ☐ Addition
22 NAME	NICHOLS, KATE	
23 STREET ADDRESS	1682 OCEANVIEW DR	
24 CITY-ST-ZIP	TIERRA VERDE, FL	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing complies with the requirements of Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 with an asterisk (*) or other designation indicating status as an officer or director.

SIGNATURE: H.E. Rummel 1-16-96 813 327-5111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number