

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 # M91357

(7)

1. Corporation Name

TYNER CORP.



Principal Place of Business

1219 E. TARPON AVENUE
TARPON SPRINGS FL 34689

Mailing Address

1219 E. TARPON AVENUE
TARPON SPRINGS FL 34689

3. Date Incorporated or Qualified
07/28/1988

3a. Date of Last Report
03/02/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FLE Number

65-0070748

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 intangible tax under s. 199.032,
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

TYNER, MURIEL
1219 E. TARPON AVE.
TARPON SPRINGS FL 34689

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 607.1508, 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 signatory to go with 11, if applicable

Signature, typed or printed name of signatory to go with 11, if applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

D

TYNER, EARL
1219 E. TARPON AVE.
TARPON SPRINGS FL 34689

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

D

TYNER, MURIEL
1219 E. TARPON AVE.
TARPON SPRINGS FL 34689

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

DELETE

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CITY-STATE-ZIP

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STREET ADDRESS
CITY-STATE-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP

Change Addition

2. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP

Change Addition

3. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP

Change Addition

4. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP

Change Addition

5. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP

Change Addition

6. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-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:

Muriel Tyner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MURIEL TYNER

1-24-96

Date

(73) 938-5597

Daytime Phone #

CR2E034 (12/95)