

2000 UNIFORM BUSINESS REPORT (UBR)

4/14/12

FILED

Jul 05, 2000 8:00 am
Secretary of State

04-12-2000 90024 005 ****61.25

DOCUMENT # N93000003869

1. Entity Name

HILLSBOROUGH COUNTY TOWING ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3426-15 STREET
8002 E HIGHWAY 92
TAMPA FL 33605
US

407 22ND ST
TAMPA FL 33605
US

2. Principal Place of Business

3. Mailing Address

3426-15 STREET
Suite, Apt. #, etc.

3426-15 ST
Suite, Apt. #, etc.
TPA FL

City & State

City & State

TPA FL

TAMPA, FL

Zip
33605-1198

Country
HILLSBORO

Zip
33605-1198

Country
HILLSBORO

4. FEI Number

59-3200550

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASTELLANO, SAM
407 22ND ST
TAMPA FL 33605

Name
ANGEL D. TRAINA
Street Address (P.O. Box Number is Not Acceptable)
3426-15 ST
TAMPA
City
FL
Zip
33605-1198

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Angelo Traina

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/5/00
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10.

OFFICERS AND DIRECTORS

TITLE	D	CASTELLANO, SAM	☒ Delete
NAME		407 22ND ST	
STREET ADDRESS		TAMPA FL 33605	
CITY-ST-ZIP			
TITLE	D	LARSEN, BOB	☒ Delete
NAME		4615 N. LOIS AVENUE	
STREET ADDRESS		TAMPA FL 33614	
CITY-ST-ZIP			
TITLE	D	TRIANA, ANGELO	☐ Delete
NAME		3426 N. 15TH STREET	
STREET ADDRESS		TAMPA FL	
CITY-ST-ZIP			
TITLE	D	COSTANIO, VICTOR	☒ Delete
NAME		3716 E. HILLSBOROUGH AVE.	
STREET ADDRESS		TAMPA FL 33610	
CITY-ST-ZIP			
TITLE			☐ Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			☐ Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	STEVE ALLEN	☒ Change ☐ Addition
NAME		7219 S. O'BRIEN	
STREET ADDRESS		TAMPA FL 33616	
CITY-ST-ZIP			
TITLE	V.P.	GLEN WRIGHT V.P.	☒ Change ☐ Addition
NAME		6306 N. NEB AVE	
STREET ADDRESS		TAMPA FL 33609	
CITY-ST-ZIP			
TITLE	D-T	ANGELO TRIANA D-T.	☐ Change ☐ Addition
NAME		3426-15 ST	
STREET ADDRESS		TPA, FLA	
CITY-ST-ZIP			
TITLE	D	JAMES STEAP D	☐ Change ☒ Addition
NAME		9602 E HWY 92	
STREET ADDRESS		TPA FL 33610	
CITY-ST-ZIP			
TITLE	D	JOSE RODRIGUEZ D	☐ Change ☒ Addition
NAME		6425 N. FLA AVE	
STREET ADDRESS		TPA FL 33604	
CITY-ST-ZIP			
TITLE	D	PHILIP WERNER D	☐ Change ☒ Addition
NAME		7209 E. BLDG AVE	
STREET ADDRESS		TPA FL 33610	
CITY-ST-ZIP			

12. 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 report or supplemental 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 817, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Angelo Traina
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/00
Date

813-268-3153
Daytime Phone #

CR2E037 (9/99)