

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

04-07-2002 90041 048 ***150.00

DOCUMENT # P00000098194

1. Entity Name

TFH CORP.

Principal Place of Business

3634 SWANS LANDING DR
LAND O'LAKES FL 34639

Mailing Address

3634 SWANS LANDING DR
LAND O'LAKES FL 34639

2. Principal Place of Business

19413 Weymouth Dr.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 2466

Suite, Apt. #, etc.

City & State

Land O' Lakes, FL

City & State

Land O' Lakes, FL

4. FEI Number

59-3677276

Applied For

Not Applicable

Zip

34639

Country

USA

Zip

34639

Country

USA

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

6. Name and Address of Current Registered Agent

KREISCHER, ALBERT C JR
1407 W BUSCH BLVD
TAMPA FL 33612

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME TRIPP II, DOUGLAS H
STREET ADDRESS 3634 SWANS LANDING DR
CITY-ST-ZIP LAND O'LAKES FL 34639

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT & SECRETARY ☒ Change ☐ Addition
NAME TRIPP II, H. DOUGLAS
STREET ADDRESS 3634 SWANS LANDING DR.
CITY-ST-ZIP LAND O'LAKES, FL 34639

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME JOSEPH TRIPP
STREET ADDRESS 19102 ALICE CIRCLE
CITY-ST-ZIP LUTZ FL 33558

TITLE TREASURER ☐ Change ☒ Addition
NAME ANNETTE J. KENT
STREET ADDRESS 3609 SWANS LANDING
CITY-ST-ZIP LAND O'LAKES, FL 34639

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3.27.02

Daytime Phone #

813-948-0656

CR2E034 (9/01)