

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 # P93000032192 (5)

1. Corporation Name

TAMPA BAY-DEVIL RAYS, INC.

NAIMOLI BASEBALL ENTERPRISES, INC. 12-29-29 Name change

Principal Place of Business

ONE STADIUM DR.
THUNDERDOME
ST. PETERSBURG FL 33705
US

Mailing Address

ONE STADIUM DR.
THUNDERDOME
ST. PETERSBURG FL 33705
US

3. Date Incorporated or Qualified
05/03/1993

3a. Date of Last Report
01/31/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-3183617

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

10. Name and Address of New Registered Agent

HIGGINS, JOHN P.
BARNETT TOWER, 200 CENTRAL AVENUE
- SUITE 2900 -
ST. PETERSBURG FL 33701

81 Name

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

One STADIUM DRIVE

83

The ThunderDome

84

City: St. Petersburg

FL

85 Zip Code

33705

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

John P. Higgins

(NOTE: Registered Agent signature required when reinstating)

1-19-95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME NAIMOLI, VINCENT J.
STREET ADDRESS ONE STADIUM DRIVE, THUNDERDOME
CITY-ST-ZIP ST. PETERSBURG FL

☐ DELETE

1.1 TITLE CHAIRMAN, PRESIDENT ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE
NAME RAYMOND A. NAIMOLI
STREET ADDRESS ONE STADIUM DRIVE, THUNDERDOME
CITY-ST-ZIP ST. PETERSBURG FL 33705

☐ DELETE

2.1 TITLE TREASURER; VICE
2.2 NAME PRESIDENT AND CHIEF
2.3 STREET ADDRESS FINANCIAL OFFICER
2.4 CITY-ST-ZIP

TITLE
NAME JOHN P. HIGGINS
STREET ADDRESS ONE STADIUM DRIVE, THUNDERDOME
CITY-ST-ZIP ST. PETERSBURG FL 33705

☐ DELETE

3.1 TITLE VICE PRESIDENT/GENERAL
3.2 NAME COUNSEL; SECRETARY
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

900001733879

-03/06/96--01042--007

***200.00

☐ Change ☐ Addition

2/3/5

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:

John P. Higgins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-96

Date

813 8253187

Daytime Phone #

CR2E034 (12/95)