

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000048692 (6)

1. Corporation Name:

GROSZ & STAMPER CONSTRUCTION CO., INC.



Principal Place of Business

9310 N 16TH ST
TAMPA FL 33612

Mailing Address

9310 N 16TH ST
TAMPA FL 33612

2. Principal Place of Business

21 Sub: Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address

26 Sub: Apt. #, etc.
27 City & State
28 Zip Country
29

3. Date Incorporated or Qualified
07/06/1993

3a. Date of Last Report
02/09/1995

4. FET Number
59-3190644

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

STAMPER, NEAL E
9310 N 16TH ST
TAMPA FL 33612

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 607.0508, 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 607.0503, Florida Statutes.

SIGNATURE NEAL E. STAMPER

PRES.

JAN. 30, 1996

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☐ DELETE D NAME: STAMPER, NEAL E STREET ADDRESS: 9310 N 16TH ST CITY, ST, ZIP: TAMPA FL 33612	☐ Change ☐ Addition 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY, ST, ZIP
☐ DELETE P NAME: STAMPER, NEAL E. STREET ADDRESS: 9310 N 16TH ST. CITY, ST, ZIP: TAMPA FL	☐ Change ☐ Addition 5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY, ST, ZIP
☐ DELETE VP NAME: GROSZ, TIMOTHY L. STREET ADDRESS: 9310 N 16TH ST. CITY, ST, ZIP: TAMPA FL	☐ Change ☐ Addition 9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY, ST, ZIP
☐ DELETE S NAME: GROSS, TIMOTHY L. STREET ADDRESS: 9310 N. 16TH ST. CITY, ST, ZIP: TAMPA FL	☐ Change ☐ Addition 13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY, ST, ZIP
☐ DELETE T NAME: STAMPER, NEAL E. STREET ADDRESS: 9310 N. 16TH ST. CITY, ST, ZIP: TAMPA FL	☐ Change ☐ Addition 17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY, ST, ZIP
☐ DELETE	☐ Change ☐ Addition 21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY, ST, ZIP

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 person or persons 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 to this address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN. 30, 1996

971-8184 (213)

CR2E034 (12/95)