FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000048692 (6)

GROSZ & STAMPER CONSTRUCTION CO., INC.

9310 N 16TH S TAMPA FL 3361		9310 N 16TH ST Tampa FL 33612-8656							
						 Date Incorporated or Qualified 07/06/1993 	1	ate of Last R 05/1996	eport
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ar	plied For
21		26	· 			59-3190644			t Applicable
Suite, Apt		Suite, Apt #, etc.	27			5. Certificate of Status Desired	d S8.75 Additional Fee Required		
City & Stat	e	City & State	¬ '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution			
Zip	Country	Zip	Cou	Country		8. This corporation has liability for	ntangibl	e tax under s	199.032,
24	25 29 30			Florida Statutes					
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
STAMPER, NEAL E				81	Name				
) N 16TH ST Pa Fl 33612		82 Street Address			ddress (P.O. Box Number is Not Acceptab	le)		
LAM	FATE 00012			83	_				
				84	City		Fl	85 Zip	Code
l office or r	registered agent, or both, in the	07.0502 and 607.1508, Florida Statute State of Florida Such change was a obligations of Section 607.0505, Flo	uthorized	d by	the corpo	corporation submits this statement for the p oration's board of directors. I hereby accep	urpose of the ap	of changing it pointment as	s registered registered
SIGNATURE									
	Slight ree, typed or pretest name of regel			i Ape	nt signature r	required when reinstating)	DATE		
12.		RS AND DIRECTORS DELETE	13.	13.		ADDITIONS/CHANGES TO OFFIC	ERS AN	☐ Change	S IN 12 Addition
TIFLE	D Stamper, Neal e	DELEVE		ŀ				L. Criorige	ווטטונטוז
NAME	9310 N 16TH ST		1 2 NA		I D D D C C C				
STREET ADDRESS	TAMPA FL 33612		•		ADDRESS				
CITY-ST-7#	p	DELETE	14 CT 21 TH	_	1-217			Change	Addition
NAME	STAMPER, NEAL E.		22 NAME						
STREET ACORESS	9310 N 16TH ST.				ADDRESS				
CITY-ST-ZIP	TAMPA FL		2.4 CI		- 1				
THUE	VP DELETE			TLE				Change	Addition
NAME	GROSZ, TIMOTHY L.		3.2 NA	ME					
STREET ADDRESS	9310 N 16TH ST.		3.3 ST	REET	ADDRESS				
CITY - ST - ZIP	TAMPA FL		3.4. CI	3.4. CiTY - ST - ZIP					
TITLE	S	DELETE	4.1 TITLE					☐ Change	Addition Addition
NAME	GROSS, TIMOTHY L.		4. 2 N	AME	1				
STREET ADDRESS	9310 N. 16TH ST.		4.3 ST	REET	ADDRESS				
CITY+S1-ZIP	TAMPA FL		4.4 CI	I.4 CITY-ST-ZIP					
TITLE	1	☐ DELETE	5.1 111	5.1 TITLE				Change	Addition
NAME	STAMPER, NEAL E.		5.2 NA	ME					
STREET ADDRESS	9310 N. 16TH ST.		5.3 ST	REET	ADDRESS				
CUTY - ST - 7IP	TAMPA FL	· · · · · · · · · · · · · · · · · · ·	5.4 CI	TY-S	T-ZIP				
1)1 <u>1</u> 5		☐ DELETE	6.1 T(1	TLE				Change	Addition
NAME			6.2 NA	AME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				
CITY - ST - ZIP			6.4 Cf	TY-S	T-ZIP				

14. I do 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 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 of flustee 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, of or an attachment with an address.

SIGNATURE:

IGNING OFFICER OR DIRECTOR

(BI3)950-0664

FILED

Mar 18 1997 8:00am

Secretary of State