

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 # P93000052362 (9)

1. Corporation Name

TIDY ISLAND-LONDON, INC.

FILED  
Jun 11 1996 8:00 am  
Secretary of State



Principal Place of Business

275 96TH AVE. N.  
STE. 2  
ST PETERSBURG FL 33702  
US

Mailing Address

275 96TH AVE. N.  
STE. 2  
ST PETERSBURG FL 33702  
US

2. Principal Place of Business

21 Suite, Apt. #, etc

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified  
07/27/1993

3a. Date of Last Report  
08/11/1995

4. FEI Number  
59-3200191

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

WILKINSON, BARRY G  
696 1ST AVE. N.  
#201  
ST. PETERSBURG FL 33701

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 607.1508, 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

Signature, typed or printed name of registered agent and date of signature

DATE of Appointment, signature required when first filing

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST  
NAME BOYD, JAMES R  
STREET ADDRESS 4209 WINDING WILLOW DR  
CITY-STATE-ZIP TAMPA FL 33624 ☒ DELETE

TITLE D  
NAME CLAMPITT, RONALD E  
STREET ADDRESS 275 96TH AVE. N. #2  
CITY-STATE-ZIP ST. PETERSBURG FL 33702 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP  
1.2 NAME FRANK S. POSE JR.  
1.3 STREET ADDRESS 275 96TH AVE. N. #2  
1.4 CITY-STATE-ZIP St. Petersburg, FL 33702 ☐ Change ☒ Addition

2.1 TITLE ST  
2.2 NAME W. Dean Tomlinson  
2.3 STREET ADDRESS 275 96TH AVE. N. #2  
2.4 CITY-STATE-ZIP St. Petersburg, FL 33702 ☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director/  
FRANK S. POSE JR. President

6/6/96

(813)-576-4549

Day

Daytime Phone #

CR2E034 (12/95)