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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000076679 (8)

INDEPENDENT INVESTMENT CORPORATION OF PASCO COUNTY INC.

, , , , , ,	•					
Principal Place of Business Mailing Address					DO NOT WRITE IN THIS SPACE	
9510 DELRAY DRIVE NEWPORT RICHEY FL 34654 US		9510 DELRAY DRIVE NEWPORT RICHEY FL 34654 US				
					3. Date Incorporated or Qualified 11/05/1993	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			NOT APPLICABLE Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State	8	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28	1	<del></del> -	Trust Fund Contribution	
Zip 24	Country 25	Z <sub>1</sub> p	Countr	у	B. This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30.	
24	9. Name and Address of Curre		1301		10. Name and Address of New Registered Agent	
CRI	ICK, DARLENE		8	Name		
1840 N.W. 107TH AVENUE PEMBROKE PINES FL 33026			ā	Street Add	dress (P.O. Box Number is Not Acceptable)	
PEI	MBROKE PINES FL 33026		8:	3		
			84	1 City	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	002 and 607.1508, Florida Statul	tes, the abo	/e-named cor	rporation submits this statement for the purpose of changing its registered	
agent. I a	<b>egistered</b> agent, or both, in the Stat <b>m fam</b> iliar with, and accept the obli	igations of, Section 607.0505. Fl	orida Statut	sy the corpora es.	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered a	(10)	C Design of A		uired when reinstating) DATE	
12.		ND DIRECTORS	13.	geni signatura requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	DELETE	1 1 TITLE		☐ Change ☐ Addition	
NAME	CRICK, DARLENE V.		1.2 NAME			
STREET ADDRESS	9510 DELRAY DRIVE		1 3 STREE	t address		
CITY-ST-ZIP	NEWPORT RICHEY FL	The sections	1.4 City-	ST-ZIP	Change Addition	
TITLE	DV	☐ DELETE	2 1 TITLE	. [	[_] Change	
NAME	CRICK, DALLAS M. 9510 DELRAY DRIVE		2.2 NAME	T ADDRESS		
STREET ADDRESS	NEWPORT RICHEY FL		2 4 CiTY	i		
CITY-ST-ZIP TITLE	TETTI VIII TIIVIILI IL	DELETE	3.1 TITLE		Change Addition	
NAME		<u> </u>	3 2 NAME			
STREET ADDRESS			3.3 STREE	ET ADDRESS		
CITY-ST-ZIP			3.4. CITY	-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAM			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE	<u> </u>	DELETE	4.4 CITY 5.1 TITLE		☐ Change ☐ Addition	
NAME		- Officit	5.2 NAME	- 1	The sounds and the sounds	
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY	1		
TITLE	<u> </u>	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
l				. 1		

6.3 STREET ADDRESS

6.4 CITY - S1 - ZIP

14. 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 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.

CR2E034 (10/97)

**FILED** 

May 05 1998 8:00am

Secretary of State

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