

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

FILED  
Mar 19 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000005127 (3)

1. Corporation Name

TARRY REAL ESTATE, INC.

Principal Place of Business

2368 SUNSET POINT RD.  
CLEARWATER FL 34625

Mailing Address

2368 SUNSET POINT RD.  
CLEARWATER FL 34625

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 754 BELCHER RD. N.  
Suite, Apt. #, etc.  
22 City & State  
23 CLEARWATER, FLORIDA  
Zip  
24 33765  
Country  
25 USA  
2a. Mailing Address  
26 2087 DRUID RD. EAST  
Suite, Apt. #, etc.  
27 City & State  
28 CLEARWATER, FLORIDA  
Zip  
29 33764  
Country  
30 USA

3. Date Incorporated or Qualified

01/12/1994

4. FEI Number

59-3220481

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

ANDERSON, GEORGE B  
2368 SUNSET POINT RD  
CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name

GRACIA, JOHN A

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

83

2087 DRUID RD. EAST

84 City

CLEARWATER

FL

85 Zip Code

33764

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 A. GRACIA

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/11/98

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CDP  
ANDERSON, GEORGE  
2848 COUNTRY CLUB DRIVE  
CLEARWATER FL 34621  
☐ DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
ANDERSON, KAY P  
2848 COUNTRY CLUB DRIVE  
CLEARWATER FL 34621  
☒ DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
GRACIA, JOHN A  
2087 DRUID RD E.  
CLEARWATER FL 34624  
☐ DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
GRACIA, FLORENCE B  
2087 DRUID RD. E.  
CLEARWATER FL 34624  
☐ DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V/S/D  
☒ Change ☐ Addition  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
P/D/C  
☒ Change ☐ Addition  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

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.

SIGNATURE:

George B. Anderson V.P./SEC

3/11/98 (813)725-1607

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0401699

CR2E034 (1097)