

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra G. Matheson
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR -7 PM 1:40

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000011841 (1)

1. Corporation Name

MRH OF TAMPA, INC.

Principal Place of Business

**2233 LAUREL OAK DR
VALRICO FL 33954**

Mailing Address

**2233 LAUREL OAK DR
VALRICO FL 33954**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1984

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59 3228556

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**

Trust Fund Contribution

☐

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**HILL, JOYCE M
2233 LAUREL OAK DR
VALRICO FL 33954**

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 fee if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	HILL, JOYCE M
STREET ADDRESS	2233 LAUREL OAK DR
CITY, ST, ZIP	VALRICO FL 33954
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY, ST, ZIP		
2.1 TITLE	VD	☐ Change ☒ Addition
2.2 NAME	Jennifer C. Hill	
2.3 STREET ADDRESS	2233 Laurel Oak Drive	
2.4 CITY, ST, ZIP	Valrico, FL 33594	
3.1 TITLE	SD	☐ Change ☒ Addition
3.2 NAME	Susan D. Hill	
3.3 STREET ADDRESS	2233 Laurel Oak Drive	
3.4 CITY, ST, ZIP	Valrico, FL 33594	
4.1 TITLE	TD	☐ Change ☒ Addition
4.2 NAME	Fred I. Hill, Jr.	
4.3 STREET ADDRESS	2233 Laurel Oak Drive	
4.4 CITY, ST, ZIP	Valrico, FL 33594	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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)(b), 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:

Joyce M. Hill

JOYCE M. HILL

4/4/95

(813) 604-2680