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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # **P94000012680** (2)

TARKENTON ENTERPRISES, INC.

FILED Jan 29 1997 8:00am Secretary of State

BLELL SELLI BELLI BELLI	: B(15) 1810 1811 1881

Principal Place of Business Mailing Address									
14404 MOORING DR.		14404 MOORING DR.							
ARGO FL 844	848- 33776-1109	LARGO FL 33776-1109	LARGO FL 33776-1109						
									e of Last Report . 5/1996
_ ′	Place of Business	2a. Mailing Address		•		4. FEI Number			Applied For
<u> </u>		26				59-3230091			Not Applicab
Suite, Apt #, etc 2 City & State 3		Suite, Apt. #, etc.			5. Certificate of Status Desired			\$8.75 Additional Fee Required	
		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	intry	***************************************	8. This corporation has liability for	ntangible	tax under	s. 199.032,
]	25	29	30					No	
	9. Name and Address of Curre	ent Registered Agent		- 1		10. Name and Address of New Re	gistered	Agent	
	rkenton, Edward L			81	Name				
144	104 MOORING DRIVE	'A 4	ŀ	82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		···
LARGO FL 34848_33776 -//		<i>,</i>	83					, 	
			ļ	84	City		<u></u>	85 Zi	p Code
				L		poration submits this statement for the p	FL	<u></u>	
12.		NO DIRECTORS	13.	TIF		ADDITIONS/CHANGES TO OFFIC	ERS AND		***********
TITLE	D	☐ DELETE	1.1 70	TLE				Change	e 🔲 Additi
AME	TARKENTON, EDWARD L 14404 MOORING DR.		12 NA		{	•			
TREET ADDRESS	LARGO FL 34646 3377	6-1109			ADDRESS				
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NAME	·		6.2 N/	AME					
STREET ADORES:	s		6.3 ST	TREET	ADDRESS				
CITY - ST - ZIP			6.4 CI	ITY-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 suppremental 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: