

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 21 AM 9:39

DOCUMENT # P94000014126 (4)

1. Corporation Name

TPI CONSULTING SERVICES, INC.

Principal Place of Business

**8420 ULMERTON ROAD SUITE 408
LARGO FL 34641**

Mailing Address

**8420 ULMERTON ROAD SUITE 408
LARGO FL 34641**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/10/1994

3a. Date of Last Report

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-3225667

Applied For
Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

Zip

24

County

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**THOMPSON, HERBERT
8420 ULMERTON ROAD SUITE 408
LARGO FL 34641**

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 607.0503 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 must represent same individual agent and the corporation)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

12.1 TITLE

PSD

12.2 NAME

**THOMPSON, HERBERT
8420 ULMERTON ROAD SUITE 408
LARGO FL 34641**

12.3 STREET ADDRESS

12.4 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

Change Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

13.5 TITLE

Change Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY - ST - ZIP

13.9 TITLE

Change Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY - ST - ZIP

13.13 TITLE

Change Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY - ST - ZIP

13.17 TITLE

Change Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY - ST - ZIP

13.21 TITLE

Change Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(9)(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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 407, Florida Statutes, and that my name appears on Block 12 or Block 13 of this document, or on an attachment with an address.

SIGNATURE:

Herbert Thompson
SIGNATURE AND TYPE IN OR PRINTED NAME OF DIRECTOR OR OFFICER

1/26/95

(813)
530-4361