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Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000030497 (9)

1. Corporation Name
TYRONE HOLDINGS, INC.



Principal Place of Business
C/O MARIE POWELL & ASSOCIATES
157-107TH AVENUE
TREASURE ISLAND FL 33706

Mailing Address
C/O MARIE POWELL & ASSOCIATES
157-107TH AVENUE
TREASURE ISLAND FL 33706-4715

3. Date Incorporated or Qualified
04/20/1994

3a. Date of Last Report
07/17/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Gregory, Sharer & Stuart Suite, Apt. #, etc.	26 Gregory, Sharer & Stuart Suite, Apt. #, etc.	59-3242459	Not Applicable
22 100 - 2nd Ave. S, #606 City & State	27 100 - 2nd Ave S, #606 City & State	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
23 St. Petersburg, FL Zip	28 St. Petersburg, FL Zip	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
24 33701	29 33701	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☒ No
25 Pinellas	30 Pinellas		

9. Name and Address of Current Registered Agent

MEYERS, ROBERT A.
157- 107TH AVENUE
TREASURE ISLAND FL 33706

10. Name and Address of New Registered Agent

81 Name
Charles L. Stuart

82 Street Address (P.O. Box Number is Not Acceptable)
100 - 2nd Ave. S, #606

83

84 City
St. Petersburg

85 Zip Code
FL 33701

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 authorized with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Charles L. Stuart* Charles L. Stuart 2/25/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	PRESIDENT
NAME	PETTON, J W	1.2 NAME	PEYTON, J. RODNEY
STREET ADDRESS	7380 SAND LAKE RD #564	1.3 STREET ADDRESS	14 BALLYNORTHLAND PARK
CITY-STATE-ZIP	ORLANDO FL 32819	1.4 CITY-STATE-ZIP	DUNGANNON BT 716DY N.IRELAND
TITLE	V	2.1 TITLE	VICE-PRESIDENT
NAME	PETTON, M E	2.2 NAME	PEYTON, M. LYNNE
STREET ADDRESS	7380 SANDLAKE ROAD #564	2.3 STREET ADDRESS	14 BALLYNORTHLAND PARK
CITY-STATE-ZIP	ORLANDO FL 32819	2.4 CITY-STATE-ZIP	DUNGANNON BT 716DY N.IRELAND
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-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 supplement thereto 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 person duly empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears on Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 3/4/97 011-44-1868 724177

CR2E034 (9/96)