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

APPROVED AND FILED

95 APR -7 AM 5:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000033156 (8)

1. Corporate Name

JAMES E. MAYO, INC.

Principal Place of Business

3835 N. 50TH ST.
TAMPA FL 33619

Mailing Address

3835 N. 50TH ST.
TAMPA FL 33619

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/02/1994

3a. Date of Last Report:

2. Principal Place of Business (21):

2a. Mailing Address (26):

Suite, Apt. #, etc. (22):

Suite, Apt. #, etc. (27):

City & State (23):

City & State (28):

Zip (24):

County (25):

Zip (29):

County (30):

4. FEI Number: 59-323-8657 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

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

9. Name and Address of Current Registered Agent

RANKIN, DAVID P
4600 W. CYPRESS ST.
TAMPA FL 33607

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 Section(s) 607.0401 and/or 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 (of New Registered Agent, if changing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	MAYO, JAMES E	12 NAME	
STREET ADDRESS	3835 N. 50TH ST.	13 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33619	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	MAYO, JOAN W	22 NAME	
STREET ADDRESS	3835 N. 50TH ST.	23 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33619	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I, the undersigned, certify that the information supplied with this report is voluntarily furnished and 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 serve 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 1, 11, or Block 14 if changed, or on an attachment with an addition.

SIGNATURE: James E. Mayo JAMES E. MAYO 4.4.95 (813) 626-7153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02000435 CP