

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

80-0284 ANR05

DOCUMENT # P94000046552

1. Entity Name

TYRONE SQUARE FOOTACTION, INC.



closed: 5/07/04
FILED

05 FEB 24 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1st MOORE CR2E034 (10/04)

Principal Place of Business

6901 22ND AVE. NORTH
ST. PETERSBURG FL 33710
US

Mailing Address

PO BOX 141269
IRVING TX 75014-1269
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3255241

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Delete
NAME NEVILLE, R. SHAWN
STREET ADDRESS 24 B OLD FARM ROAD
CITY-ST-ZIP DARIEN CT 06820

TITLE SP ☒ Delete
NAME APPLBAUM, LEE D
STREET ADDRESS 279 SPRING VALLEY ROAD
CITY-ST-ZIP PARK RIDGE NJ 07650

TITLE VP ☒ Delete
NAME COLTER, WARREN
STREET ADDRESS 3835 GRANBURY DR.
CITY-ST-ZIP DALLAS TX 75287

TITLE VPS ☐ Delete
NAME LYNCH, MICHAEL
STREET ADDRESS 122 PASADENA PLACE
CITY-ST-ZIP HAWTHORNE NJ 7506

TITLE VPS ☐ Delete
NAME WILSON, MARY B
STREET ADDRESS 14222 SOUTHERN PINES DRIVE
CITY-ST-ZIP DALLAS TX 75234-3720

TITLE AS ☐ Delete
NAME GALANTE, ANDREA
STREET ADDRESS 1220 OXFORD LANE
CITY-ST-ZIP GRAPEVINE TX 76051

TITLE PRESIDENT ☐ Change ☒ Addition
NAME Maureen Richards
STREET ADDRESS 933 MacARTHUR BLVD., MAHWAH, NJ 07430
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME Timothy Garahan
STREET ADDRESS 67 MILLBROOK ST., WORCESTER, MA 01606
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TIMOTHY GARAHAN

FEB - 7 2005

Date

Daytime Phone #