FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000050477 (6)**

1. Corporation Name
GREATER TAMPA ENTERPRISES OF FLORIDA, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 846 201 N FRANKLIN ST SUITE 2720 TAMPA FL 33601 US	POST OFFICE BOX 846 201 N FRANKLIN ST SUITE 2720 TAMPA FL 33601 US

3. Date Incorporated or Qualified: 07/08/1994
3a. Date of Last Report: 03/07/1995

4. FEI Number: 59-3262456 ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 Tampa Florida	26 Box 846 Tampa
Suite, Apt. #, etc. 22 201 - N Franklin St Suite 2720	Suite, Apt. #, etc. 27
City & State 23 Tampa Fl	City & State 28 Tampa Fl
Zip / Country 24 33602 25	Zip / Country 29 33602 30 US

9. Name and Address of Current Registered Agent

GRANDOFF, JOHN B
101 E KENNEDY BLVD
SUITE 3700 BRNETT PLAZA
TAMPA FL 33602

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 607.0502 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Joseph M Paniello 2/21/96
Signature, Typed or Printed Name of Registered Agent and Title if Officer or Director of Registered Agent (if registered agent is a corporation) — Date

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1 1 TITLE	☐ Change ☐ Addition
NAME	PANIELLO, SR. J M		1 2 NAME	
STREET ADDRESS	1902 BROOKLINE STREET		1 3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL		1 4 CITY-ST-ZIP	
TITLE	S	☐ DELETE	2 1 TITLE	☐ Change ☐ Addition
NAME	JESSEE, PAUL D		2 2 NAME	
STREET ADDRESS	3325 BAYSHORE BLVD., #A623		2 3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL		2 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3 1 TITLE	☐ Change ☐ Addition
NAME			3 2 NAME	
STREET ADDRESS			3 3 STREET ADDRESS	
CITY-ST-ZIP			3 4 CITY-ST-ZIP	
TITLE		☐ DELETE	4 1 TITLE	☐ Change ☐ Addition
NAME			4 2 NAME	
STREET ADDRESS			4 3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY-ST-ZIP	
TITLE		☐ DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5 2 NAME	
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-ST-ZIP			5 4 CITY-ST-ZIP	
TITLE		☐ DELETE	6 1 TITLE	☐ Change ☐ Addition
NAME			6 2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	
CITY-ST-ZIP			6 4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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 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: Joseph M Paniello Pres. 2/21/96 813/2533894
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)