## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000055021 (7)

COLEMAN TUCKER, INC.

				• •					
Principal Place of Business		Mailing Address	Mailing Address			A 1001/1001 HT (BUT) OLD H DOWN BOUR BLEEF	ARIAI DIIDI KI	#   <b>    </b>	i <b>libi id</b> ul
2958 1ST AVE N ST PETERSBURG FL 33713 ST PETERSBURG FL			33713-8635		!				
					3. Date Incorporated or Qualified 07/22/1994	3a. Date of Last Report 01/24/1996			
2. Principal P	race of Business	2a. Mailing Address				4. FEI Number		Ap	oplied For
21		26				59-3264315			ot Applicable
Suite, Apt		Suite, Apt. #, etc.	27			5. Certificate of Status Desired Fee Required			
City & State	ê	City & State	<del>├</del> ¬ ′			6. Election Campaign Financing	m	\$5.00	
<b>23</b> Zip	Country	7 <sub>00</sub>	Zip Country			Trust Fund Contribution		Added t	
24	25	29	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
24]	9. Name and Address of Curre		30	[		10. Name and Address of New Re			
GRE	GG, MARK H	······································	-	81 Na	me				**
	FIRST AVENUE NORTH		ļ	82 Stre	oot Addro	ss (P.O. Box Number is Not Acceptab	la)	<del> </del>	
	PETERSBURG FL 33713		ļ	0.2 Out	BEI MUUTO	SS (P.O. рох миніры із могисофіас	<i>:</i> е)		l
<del>-</del>	BIMITERIA I G			83				****	<del>- \</del>
				84 City	у		FL	<b>85</b> Zip (	Code
11. Persuant t	to the provisions of Sections 607.05	02 and 607 1508. Florida Stat	utes the at	hove-nan	ned corpc	oration submits this statement for the p	uroose of o	hanning it	registered
office or re	registered agent, or both, in the Stati im familiar with, and accept the oblig	te of Florida. Such change was	s authorized	d by the	corporatio	on's board of directors. I hereby accep	t the appo	intment as	registered
•	ті таппінаг міш, апо ассерт іне осліў	даноня от, веснон осилово, г	-lorida ətat	utes.					
SIGNATURE	Signature it need or promod name of registered ag	geot and title it applicable. (No	OTE Flegisterer	d Agent sign	ature requirer	d when reinstating)	DATE		<del></del>
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 Til	TLE			Ţ	Change	☐ Addition
NAME	GREGG, MARK H		1,2 NA	AME					
STREEL ADDRESS	89101 OVERSEAS HWY		1.3 ST	treet adore	£\$S				
CITY - S1 - ZIP	KEY LARGO FL 33037	***************************************	1.4 CI	TY-ST-ZIP					
TITLE	D	☐ DELETE	2.1 Tü	TLE				Change	Addition
NAME	GREGG, THOMAS M		2.2 NA	AME					
STREET ADDRESS	11444 74TH AVE N		2.3 \$1	treet adore	ESS				
CITY - ST - ZIP	ST PETERSBURG FL 34642	T or ere		ITY-ST-ZIP				<b></b>	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
TILE		☐ DELETE	3.1 TIT				L	Change	Addition
NAM:			3.2 NA			•			
STREET ADDRESS				TREET ADORE					
CITY - S1 - ZIP		DELETE		ITY-ST-ZIP	+-			- Obenne	4 aldition
TITLE		L] DELCT	4.1 Til				L	Change	Addition
NAME expert appeared			4. 2 Ni						
STREET ADDRESS				TREET ADDRE	ESS				
CITY - S1 - 7IP TILE		DELETE	4.4 CI	ITY-ST-ZIP				Change	Addition
NAM:		La bacere	5.2 NA					Cilduido	L. Accinion
STREET ADDRESS				ame Treet addre	rne				
					:55				
CITY - ST- ZIP TITLE		DELETE	6.4 CI	ITY-ST-ZIP Ti f	<del></del>		т	Change	Addition
NAME			6.2 NA				_	- V.M. 6-	
STREET ADORESS	ĺ		B B	TREET ADDRE	F00				
CITY - S1 - ZIP				ITY-ST-ZIP	.50				
14. I do heret	by certify that the information supplie	ed with this filing does not qua	alify for the	exemption	on stated	in Section 119.07(3)(i), Florida Statutes	. I further	certify that	the
informatio Lam ari of	in indicated on this annual report or i	supplemental annual report is or the receiver or trustee empo	s true and a owered to e	accurate:	and that n	ny signature shall have the same lega as required by Chapter 607, Florida S	l effect as i	if made und	der path: that

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR OTHECTOR

1/17/97

813-327-1000

**FILED** 

Jan 29 1997 8:00am

Secretary of State

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