

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 16 PM 3:31

DOCUMENT # P94000060037 (6)

1. Corporation Name

17TH STREET APARTMENTS, INC.

Principal Place of Business

201 N. FRANKLIN ST.
SUITE 2100
TAMPA FL 33602

Mailing Address

P.O. BOX 3433
TAMPA FL 33601

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/15/1994

3a. Date of Last Report

N/A

4. FEI Number

59-3271435

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 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

USA

29 Zip

30 Country

USA

9. Name and Address of Current Registered Agent

SZABO, STEPHEN J III
201 N. FRANKLIN ST.
SUITE 2100
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

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SZABO, STEPHEN J
STREET ADDRESS	16201 AVILA BLVD.
CITY- ST- ZIP	TAMPA FL 33613
TITLE	D
NAME	SZABO, JEANETTE M
STREET ADDRESS	16201 AVILA BLVD.
CITY- ST- ZIP	TAMPA FL 33613
TITLE	D
NAME	SZABO, MARK A
STREET ADDRESS	16512 LAKESHORE RD.
CITY- ST- ZIP	TAMPA FL 33624
TITLE	D
NAME	SZABO, DOUGLAS B
STREET ADDRESS	1715 MONROE ST.
CITY- ST- ZIP	FT. MYERS FL 33901
TITLE	D
NAME	SZABO, STEPHEN J III
STREET ADDRESS	12108 CYPRESS HOLLOW PLACE
CITY- ST- ZIP	TAMPA FL 33624
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☐ Change ☒ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY- ST- ZIP		
2.1 TITLE	V, S	☐ Change ☒ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY- ST- ZIP		
3.1 TITLE	V, T	☐ Change ☒ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		
4.1 TITLE	V	☐ Change ☒ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY- ST- ZIP		
5.1 TITLE	V	☐ Change ☒ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY- ST- ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

(Signature, typed or printed name of officer or director)

STEPHEN J. SZABO, III Vice President

2/12/95

813 229 3321
Tampa, Florida