FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P9400068244 (0)

TAB ASSOCIATES, INC.

Principal Place of Business

28722 CARMEL WAY BONITA SPRINGS FL 33923 Mailing Address

28722 CARMEL WAY BONITA SPRINGS FL 3



DOMITA SPAIN	100 FE 33323	DOMIN OFNINGS FC 33	323			
					 Date incorporated or Qualified 09/16/1994 	3a. Date of Last Report 04/20/1995
2. Principal Pla	ce of Business HANNEL DRIVE	2a. Mailing Address 26 177 CHAN	NEL	DRIVE	4. FEI Number 65-0515879	Applied For Not Applicable
Suite, Apt. #	::11C::	Suite, Apt. #, etc.	<u></u>		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 NA	LES, FL	City & State 28 NAPLES	FL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
^{Zip} 3396	3 25 USA	²⁹ 33963	30 Cour	USA		□No
	9. Name and Address of Current	Hegistered Agent		81 Name	10. Name and Address of New R	egistered Agent
HIGGINS						
	ARMEL WAY			82 Street Add	dress (P.O. Box Number is Not Acceptable CHANNEL DK)	
BONITA S	SPRINGS FL 33923		1	83	V //////	
				84 City	1 1 01	85 Zin Code
				/ N	APLES	FL 733963
11. Pursuant to or registere	o the provisions of Sections 607.0502 and agent, or both, in the State of Florida	and 607.1508, Florida Statutes a. Such change was authorize	s, the abov d by the o	ze-namied corpi orporation's bo	oration submits this statement for the pur bard of directors. Thereby accept the appo	pose of changing its registered office pintment as registered agent. I am
	n, and accept the obligations of, Section		,		, , , , , , , , , , , , , , , , , , , ,	- · · · · · · · · · · · · · · · · · · ·
SIGNATURE _	Signature, typica or printed having of registered agent a	rankti karadisakto (Nasti	s De entroner	A se is a parse la construir	red wher read that q	DATE
12.	OFFICERS AND		13.	* Sign if the result	ADDITIONS/CHANGES TO OFF	
TITLE	DP	DI LETE	1. 1 311	TLE		Change Addition
NAME	HIGGINS, BERNARD J.		1.2 NA	ME .		
STREET ADDRESS	28722 CARMEL WAY		1.3.\$1	HEHT ADDRESS <equation-block></equation-block>	77 CHANNEL D	RIVE
CITY - S ⁷ - ZIP	BONITA SPRINGS FL		1.4 C(T	Y-SI-ZIF	VAPLES, FL 3390	
TITLE	HIGGINS, ANNETTE H.	DETELE	2 1 111			Change 🔲 Addition
NAME SIRSEL AGGREGO	28722 CARMEL WAY		2 2 NA	Mt uscrupposes	177 CHANNEL DI	RIVE
STREET ADDRESS CITY - ST - ZIP	BONITA SPRINGS FL			REET ADDRESS Y-ST-ZIP	VAPLES, FL 339	13
TITLE		[] DELETE	3 I TH			Change Addition
NAME		-	3.2 NA	Mč		
STREET ADDRESS			33 ST	REET ADORESS		
CITY - ST - ZIP			3.4.011	Y-ST-ZIP		
TITLE		☐ DELETE	4 1 10	TLF		Change Addition
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NAME		L. occur	5 2 NA	i		Change Mudition
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CITY-ST ZIP				TY - ST - ZIF		
THILE		DELETE	6 1 T:			Change Addition
NAME			6 2 NA	ME		_
STREET ADDRESS			6 3 S1	REET ADDRESS		
CITY - ST - ZIP				[Y - ST - ZiP		
certify that oath; that I	the information indicated on this annua	al report or supplemental annu ation or the receiver or trusted	al report is empower-	true and accu	of for the exemption stated in Section 119, irate and that my signature shall have the this report as required by Chapter 607, F	same legal effect as if made under

SIGNATURE: Ante H Higgins ANNETTE H HIGGINS 4/8/96 (941)597-5605

CR2E034 (12/