

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

**APPROVED
AND
FILED**

95 APR 21 PM 3:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000089371 (6)

1. Corporation Name

CLB OF PINELLAS, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/08/1984	3a. Date of Last Report n/a
4. FEI Number 59-3282882	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
B. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
1001 37TH ST. NORTH SUITE B ST PETERSBURG FL 33713	1001 37TH ST. NORTH SUITE B ST PETERSBURG FL 33713
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name Michael R. Rieth
82. Street Address (P.O. Box Number is Not Acceptable) 1001 37th Street North, Suite B
83. City St. Petersburg
84. Zip Code FL 33713

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.

changed with Dept. 2/8/95

SIGNATURE

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

(NOTE: Registered Agent Signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D Michael R. Rieth	1.1 TITLE	☐ Change ☐ Addition
NAME	1001 37th Street N, Suite B	1.2 NAME	700001403217
STREET ADDRESS	St. Petersburg, FL 33713	1.3 STREET ADDRESS	-04/24/95--01053--016
CITY-ST-ZIP		1.4 CITY-ST-ZIP	***2000.00 ***200.00
TITLE	VP/S Karyn Rieth	2.1 TITLE	☐ Change ☐ Addition
NAME	T/D 1001 37th Street N, Suite B	2.2 NAME	
STREET ADDRESS	St. Petersburg, FL 33713	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		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)(b), 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 otherwise filed filing.

SIGNATURE:

Michael R. Rieth, President

3/15/95

(813) 321-3900