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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000092784

1. Corporation Name

TANDROUGH & TENOR, F.A.								
		Mailing Address			-	III: BBIII BBIEB IBI	EB IIGII IBABI I	
Principal Place		_			•			
314 S. MISSOURI AVE. 314 S. MISSOURI AVE. SUITE 310 SUITE 310								
CLEARWATER FL 33756 CLEARWATER FL 33756					DO NOT WRI	TE IN THIS S	PACE	
US US					3. Date Incorporated or Qualifed			
					12/23/1994			
Principal Place of Business 2a. Mailing Address					4. FEI Number		Apr	plied For
21 26					59-3287887			t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired		\$8.75 A	
22 27					S. Cormonic by States Downer		Fee Rec	 -
City & State City & State					6. Election Campaign Financing	П	\$5.00	,
28					Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip	Country		8. This corporation owes the curr			
24	25	29 30)		Personal Property Tax.			□No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Robert P. Evans 82 Street Address (P.O. Box Number is Not Acceptable)								
YARBROUGH, ORIN S				""Rob	ert P. Evans			
314 S. MISSOURI AVE.						able)		
SUITE 310				314	<u>5. missour: Ave</u>			
CLEARWATER FL 33756				Suite	310			
CLEANWAIEN PL 33/30				City			85 Zip C	ode
·				Clearn	10-125	<u>FL</u>		756
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 of the corporation of 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 of the corporation of 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 of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of								
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named curporation submits this statement for the purpose of changing its legistered of 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	Kall P. Ivans	- Robert P	: EVEIN.	s V. A	D, SECTY	3-15 DATE	-77	
<u> </u>	Signature, typed or printed name of registered agent		egistered Agent sig	nature required	when reinstating) ADDITIONS/CHANGES TO OF			DC (N. 12
12.	OFFICERS AND	DIRECTORS DELETE	13. 1,1 TITLE		ADDITIONS/CHANGES TO OF		Change	Addition
	YARBROUGH, ORIN S	27 066616	1.2 NAME				<u> </u>	
NAME	· ·	10	1.3 STREET AD	nnréé				
STREET ADDRESS								
CITY-ST-ZIP	CLEARWATER FL	☐ DELETE	1.4 CITY-ST-ZII 2.1 TITLE	PT	٠ ٨		Change	Addition
TITLE	• • •		2.1 VIILE		.5	,		
NAME	SARNOWSKI, DAVID J.							1
STREET ADORESS	AL TARVILLED EL			DRESS				
CITY-ST-ZIP -	-CLEARWATER FL	DELETE	2.4 City-St-Z	V S	7		(X) Change	Addition
TITLE	SD. EVANS, ROBERT P		3.1 IIILE 3.2 NAME	"]	÷			
NAME	314 S. MISSOURI AVE., SUITE 3	110		20500				ĺ
STREET ADDRESS	CLEARWATER FL	יוט	3.3 STREET AD					}
CITY-ST-ZIP	CLEANWAIEN FL	☐ DELETE	3.4. CITY+ST+ZI	P			Change	Addition
TITLE		C Deterie						
NAME			4. 2 NAME	00500				
STREET ADDRESS			4.3 STREET AD					ļ
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZII 5.1 TITLE	-	· · · · · · · · · · · · · · · · · · ·		Change	Addition
TITLE			5.1 TITLE 5.2 NAME	-				
NAME			5.3 STREET AD	DRESS				
STREET ADDRESS	÷ 1		5.4 CITY-ST-ZII					}
CITY-ST-ZIP		, . DELETE	6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	,		☐ Change	Addition
1		CONTRACT OF COME	62 NAME					
NAME STREET ADDRESS			6.3 STREET AD	- 1				
PIMPPI VIUDICO	•							

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF DOVING IGNING OFFICER OR DIRECTOR Presi den+

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