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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

Name of the Party of the Party

TITLE

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000032178 (2)

CORTEZ COMMONS CORPORATE, INC.

Principal Place of Business Mailing Address 1733 FLETCHER AVE. 1733 FLETCHER AVE. TAMPA FL 33612 **TAMPA FL 33612** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3317804 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Walters, Clifford L 802 11TH STREET WEST Street Address (P.O. Box Number is Not Acceptable) BRADENTON FL 34205 84 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** (NCIT). Registered Agent signature required when reinstating) Signature, typod or ponted came of registered agent and the if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. **PDS** DELETE ☐ Change Addition TITLE 1.1 TITLE NAME BARNES, TERESA 1.2 NAME PO BOX 12749 N/A STREET ADDRESS 1.3 STREET ADDRESS ST. PETE FL 33733-2749 CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE Change TITLE 2 1 TITLE NAME RICE. SUZANNE L STREET ADDRESS 1733 FLETCHER AVE 2.3 STREET ADDRESS **TAMPA FL 33612** CITY-ST-ZIP 2.4 CITY - \$1 - ZIP DELETE X Change Addition TITLE 3.1 TITLE Ferrucci, Mark A: 1209 Orange Street NAME **Ferrucci. Mark a** 3.2 NAME 1733 FLETCHER AVE STREET ADDRESS 3.3 STREET ADDRESS wilmington, DE 19801 TAMPA FL 33612 CITY-ST-ZIP 3.4. CITY-ST-ZIP Levin, Richard 1933 West Fletcher ave. DELETE Change Addition TITLE 4.1 TITLE LEVIN, RICHARD 4 2 NAME NAME 7646 N LOCKWOOD RIDGE RD. STREET ADDRESS 4.3 STREET ADDRESS Tampa, FL 33612 SARASOTA FL 34243 CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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 optim attachment with an address.

**FILED** 

Apr 29 1998 8:00am

Secretary of State