

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000050817 (2)

1. Corporation Name

NELCO OF TAMPA BAY, INC.



Principal Place of Business

245 12TH AVE NE
ST PETERSBURG FL 33701

Mailing Address

245 12TH AVE NE
ST PETERSBURG FL 33701

3. Date Incorporated or Qualified

06/29/1995

3a. Date of Last Report

2. Principal Place of Business

21 1325 Snell Island Blvd

22 Suite, Apt. #, etc.
Suite 205F

23 City & State
St. Petersburg, FL

24 Zip
33704

25 Country
USA

26 Mailing Address

26 1325 Snell Island Blvd

27 Suite, Apt. #, etc.
Suite 205F

28 City & State
St. Petersburg, FL

29 Zip
33704

30 Country
USA

4. FEI Number

59-3324329

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

9. Name and Address of Current Registered Agent

GRAMLIN, SCOTT B
245 12TH AVE NE
ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name
John G. Houser

82 Street Address (P.O. Box Number is Not Acceptable)
635 37th Avenue NE

83

84 City
St. Petersburg

FL

85 Zip Code
33704

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

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

(NOTE: Registered Agent signature required when re-registering)

4/30/96

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME GRAMLIN, SCOTT B
STREET ADDRESS 245 12TH AVE NE
CITY-ST-ZIP ST PETERSBURG FL 33701

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P, S, T, D ☐ Change ☒ Addition
1.2 NAME John G. Houser
1.3 STREET ADDRESS 635 37th Avenue Northeast
1.4 CITY-ST-ZIP St. Petersburg, FL 33704

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ 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 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)(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:

John G. Houser
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

Date

813/895-4332

Daytime Phone #

5-1-96

CR2E034 (12/95)