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 # P95000076928 (7)

		_	
DIAMOND	MAAV	BRINING	COMPANY

Principal Place of Business Mailing Address

ONE PROGRESS PLAZA
ST. PETERSBURG FL 33701

Mailing Address
ONE PROGRESS PLAZA
ST. PETERSBURG FL 33701



					3. Date Incorporated or Qualified 3a. Da 10/06/1995	ite of Last Report	
	(5)	2a. Mailing Address			4. FEI Number	Applied For	
	part 1,000 or 200 miles		Fry		65-0622351	Not Applicable	
			1600		\$8.75 Additional		
· · · · · — - · · · · · · · · · · · · · · · · · ·				5. Certificate of Status Desired	Fee Required		
27 One Progress Pla		s riaza	!	6. Election Campaign Financing	\$5.00 May Be		
		ıra Fl			Added to Fees		
23	Country	28 St. Petersburg, FL Zip Country		8. This corporation has liability for intangible tax under s 199.032,			
Zip 24	25	29 33701		n troat in the Ministry in the			
24	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
				31 Name	Name		
EDV DALI	I INTE AA				(C.C. Charles Lange Blad Accordable)		
FRY, PAULINE M		1	82 Street Address (P.O. Box Number is Not Acceptable) One Progress Plaza - Suite 2600				
ONE PROGRESS PLAZA		<u> </u>	63				
SI. PETE	ST. PETERSBURG FL 33701						
			[34 City		85 Zip Code	
		10071500 5 6			rporation submits this statement for the purpose of	hanging its registered office	
or registere familiar with	o the provisions of sections do 7.3302, and agent, or both, in the State of Florich, and accept the obligations of, Section,	ta. Such change was authoriz	ea by the ci	orporation's I	polation such its file statement for the polyect of c board of directors. I hereby accept the appointment	as registered agent. I am	
SIGNATURE .	Signature, typed or printed hame of registered agent	and title if applicable (N1	TE: Ragistered /	gent si mature re	equired where reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AF		
TITLE	D	☐ DEFELE	1 1 1 1	LF		Change Addition	
NAME	KELLER, RICHARD D	1.2 NAME					
STREET ADDRESS	% one progress plaza	AZA 1.3 STREFT ADDRESS					
CITY-ST-ZIP	ST. PETERSBURG FL 33701		1.4 CIT	Y-ST-ZIP			
TITLE	D	☐ DELETE	2 1 10	LF		Change Addition	
NAME	MEADE, LE JR 22 NAME						
STREET ADDRESS	% ONE PROGRESS PLAZA 23 STREET ADDRE		REEL ADDRESS	108 E. Main Street, Suite 210			
CITY-ST-ZIP	ST. PETERSBURG FL 33701 240/TY-S		Y-ST-ZiP	Kingsport, Tennessee 37660			
TITLE	D	DELETE	3 1 TI	LE	D/P	Change Addition	
NAME	MULLINS, BRAXTON B	MULLINS BRAXTON B 32 NAME					
SIREET ADDRESS			REET ADDRESS	Kentucky Route 1088, Yellow Creek			
CITY-ST-ZIP	ST. PETERSBURG FL 33701		3 4 CI	Y - ST - ZIP	Sassafras, Kentucky 41759		
TITLE		DELETE	4. 1 TI	l F	VP/T	Change X Addition	
NAME		_	4.2 5.4	VIE	BOMBINO, MICHAEL V.		
STREET ADORESS			4.3 51	REET ADDRESS	One Progress Plaza		
				Y-S1-ZIP	St. Petersburg, FL 33701		
CITY - ST - ZIP		DELETE	5 1 TI		S	☐ Change ☒ Addition	
NAME		_	5 2 NA	ME	HALEY, KATHLEEN M.		
STREET ADDRESS				REET ADDRESS	One Progress Plaza		
1				Y-ST-ZIP	St. Petersburg, FL 33701		
CITY-S1-ZIP TITLE		DELETE	6 1 To		AS	Change 🗶 Addition	
			6 2 NA		MUCCI, RALPH S.		
NAME			1	REET ADDRESS	1		
STREET ADDRESS				Y-ST-ZIP	One Progress Plaza St. Petersburg, FL 33701		
CITY-ST-ZIP	w certify that the information supplied	with this filing is voluntarily fur	nished and	Joes not qua	alify for the exemption stated in Section 119.07(3)(k).	Florida Statutes. I further	

4. Too hereby certify that the information supplied with this limit is volunterity furnished and does not quality for the exemption stated in section 1.13.07(3)(k), Fronta Statutes. 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 is if made under oath; that I am an officer or director of the corporation or the receiver or trusted 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.
VARIATEEN M. HATEV.

SIGNATURE:

NING OFFICER OR DIRECTOR

3/18/96 (813) 824-6531

Daylinie Phone #

CR2E034 (12/9)