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FILED

Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000092681 (2)

1. Corporation Name

T.G.D. ASSOCIATES, INC.

Principal Place of Business

13355 SOUTH BELCHER ROAD, SUITE R
LARGO FL 34643

Mailing Address

13355 SOUTH BELCHER ROAD, SUITE R
LARGO FL 34643

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/06/1995

4. FEI Number

59-3349121

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21. 3159 SAN JOSE ST.
Suite, Apt. #, etc.

22. City & State

23. CLEARWATER, FL
Zip

24. 33759

25. USA

2a. Mailing Address

26. 3159 SAN JOSE ST.
Suite, Apt. #, etc.

27. City & State

28. CLEARWATER, FL
Zip

29. 33759

30. USA

9. Name and Address of Current Registered Agent

HOLE, PATRICIA
13355 SOUTH BELCHER RD.
STE. R
LARGO FL 33773

10. Name and Address of New Registered Agent

81. Name

82. Str.

83. P.O. Box Number (Not Acceptable)

84. City

PATRICIA HOLE

3159 SAN JOSE ST.

CLEARWATER

FL

85. Zip Code

33759

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

Patricia A. Hole

(NOTE: Registered Agent signature required when reinstating)

DATE

4/2/98

12. OFFICERS AND DIRECTORS

TITLE PD
NAME HOLE, PATRICIA A
STREET ADDRESS 13355 SOUTH BELCHER ROAD, SUITE R
CITY-ST-ZIP LARGO FL

TITLE STD
NAME THOMPSON, MARION
STREET ADDRESS 13355 SOUTH BELCHER ROAD, SUITE R
CITY-ST-ZIP LARGO FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME PATRICIA A. HOLE
1.3 STREET ADDRESS 3159 SAN JOSE ST.
1.4 CITY-ST-ZIP CLEARWATER, FL 33759

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

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

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

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Patricia A. Hole

4/2/98

813 726 3432

CR2E034 (10/97)