

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91844 002 ***150.00

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DOCUMENT # P95000097048

1. Entity Name

TERINO MANAGEMENT, INC.



Principal Place of Business

**301 WEST 131ST AVE.
TAMPA FL 33612**

Mailing Address

**301 WEST 131ST AVE.
TAMPA FL 33612**

2. Principal Place of Business

12400 N. Nebraska Ave

Suite, Apt. #, etc.

3. Mailing Address

12400 N. Nebraska Ave.

Suite, Apt. #, etc.

City & State

Tampa Florida

Zip
33612

Country

USA

City & State

Tampa, Florida

Zip
33612

Country

USA

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SHIVERS, OLIN G
201 N. FRANKLIN ST.
SUITE 2100
TAMPA FL 33602**

7. Name and Address of New Registered Agent

Name **James L. Terino**

Street Address (P.O. Box Number is Not Acceptable)

12400 N. Nebraska Ave

City **Tampa**

FL

Zip Code

33612

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

James L. Terino **James L. Terino**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003-Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	TERINO, DAVID F	
STREET ADDRESS	9350 KENTON RD.	
CITY-ST-ZIP	WESLEY CHAPEL FL 33544	
TITLE	D	<input type="checkbox"/> Delete
NAME	TERINO, JAMES L	
STREET ADDRESS	301 WEST 131ST AVE.	
CITY-ST-ZIP	TAMPA FL 33612	
TITLE	D	<input type="checkbox"/> Delete
NAME	TERINO, CHRISTOPHER	
STREET ADDRESS	C/O 12400 N. NEBRASKA AVE.	
CITY-ST-ZIP	TAMPA FL 33612	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James L. Terino **James L. Terino**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-03

Date

813-244-7827

Daytime Phone #

CR2E034 (10/02)