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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000047606 (4) DOCUMENT #

**GREG WALSH CORPORATION** 

## **FILED** May 07 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 4201 62 AVE NORTH STE 19 4201 62 AVE NORTH STE 19 PINELLAS PARK FL 34665 PINELLAS PARK FL 34665 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/05/1996 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3384598 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 🔀 Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WALSH, GREG 1420 1/2 JUNGLE AVE N. 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33710 83 84 City 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** Signature, typed or printed name of registered agent and title if applicable (NC)11: Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change **Addition** TITLE 1.1 TITLE WALSH GREG 1185. WESTSHORE BLUD \$409 **ALLISON, GREG** NAME 1.2 NAME 1420 1/2 JUNGLE AVENUE N STREET ADDRESS 1.3 STREET ADDRESS TAMPA, FL. 33609.2576 ST PETERSBURG FL 33710 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 21 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TIT) F NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 effect this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: V

GREG WALSH

4-30-98 (813) 259-9811