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

**CORPORATION** ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #**1. Corporation Name P96000103420 (1)

TIERRA VERDE LEASING. INC.

Principal Place of Business Mailing Address 5505 W. GRAY ST. P.O. BOX 20301 TAMPA FL 33809 TAMPA FL 33622

## **FILED** May 11 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>12/26/1996</u> 2. Principal Place of Business 2s. Mailing Address 4 FEI Number Applied For 26 59-3423360 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Ζip Country Country 8. This corporation owes or has paid the current year Intangible Yes □ Ño 24 30 Personal Property Tax due June 30. 25 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LUBRANO, ANDREW J 101 E KENNEDY BLVD. SUITE 3700 Street Address (P.O. Box Number is Not Acceptable) 82 **BARNETT PLAZA** 83 TAMPA FL 33602 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 (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE MCNICHOLS, EUGENE H 1.2 NAME NAME 134 9TH STREET EAST STREET ADDRESS 1.3 STREET ADDRESS TERRA VEROE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP □ DELETE Change Addition TITLE 2.1 TITLE **GOETSCHIUS, BERBERT T** NAME 2.2 NAME 4117 SALTWATER BLVD. STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TiTLE JONES, LARRY F MALEF 3.2 NAME **2930 TAMBAY** STREET ADDRESS 3.3 STREET ADDRESS tampa fl 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZW 4.4 CITY-ST-2IP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 14. Thereby certify that the information supplied with indicated on this annual report of supplied with indicated on this annual report of supplied mental officer or director of the corporation of the receip Block 12 or Block 13 if changed of an integral this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information including the first state and accurate and that my signature shall have the same legal effect as if made under oath; that I am an erfort trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

ice Presiden

3/11/9**2** 

(813)282-3828