

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

**PROFIT
CORPORATION
ANNUAL REPORT
1998**

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

DOCUMENT # P97000005201

 1. Corporation Name
TARPON SCURRY, INC.

 Principal Place of Business Mailing Address
501 First Avenue, Ste. 702 501 First Avenue, Ste. 702
St. Petersburg, FL 33701 St. Petersburg, FL 33701
FILED
98 MAY -1 PM 12:48
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 1/17/97	
21. Subd. Apt. #, etc.		26. Subd. Apt. #, etc.		4. FEI Number 59-3426247	
22. City & State		27. City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24. Country		29. Country		7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30 ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
INTRASTATE REGISTERED AGENT CORPORATION 701 Brickell Avenue, Ste. 3000 Miami, FL 33131		81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. City 84. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 of Registered Agent (Print Name, State, Street Address, and the 5-digit zip code)

(NOTE: Registered Agent's signature is required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/S/T ☐ DELETE	11. TITLE	☐ Change ☐ Addition
NAME	Stephen Comeau	12. NAME	
STREET ADDRESS	720 Brightwaters Blvd., N.E.	13. STREET ADDRESS	
CITY-ST-ZIP	St. Petersburg, FL 33704 ☐ DELETE	14. CITY-ST-ZIP	
TITLE	☐ DELETE	21. TITLE	☐ Change ☐ Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY-ST-ZIP		24. CITY-ST-ZIP	
TITLE	☐ DELETE	31. TITLE	☐ Change ☐ Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY-ST-ZIP		34. CITY-ST-ZIP	
TITLE	☐ DELETE	41. TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY-ST-ZIP		44. CITY-ST-ZIP	
TITLE	☐ DELETE	51. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY-ST-ZIP		54. CITY-ST-ZIP	
TITLE	☐ DELETE	61. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY-ST-ZIP		64. 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 included 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 appointment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen Comeau

Date

Expiring 12/31/98

CR2E004 (10/97)