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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**19**98

P97000014414 (1) **DOCUMENT** #

EBK PROPERTIES III, INC.

Principal	Place	of	Business

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550 NORTH REO STREET

Mailing Address

550 NORTH REO STREET SUITE 105B

## **FILED** Apr 29 1998 8:00am Secretary of State



SUITE 1058 DO NOT WRITE IN THIS SPACE TAMPA FL 33609 TAMPA FL 33609 3. Date Incorporated or Qualified 02/10/1997 2. Principal Place of Business 2a. Mailing Address Applied For 5510 W. LaSalle Street 5510 W. LaSalle Street 59-3427329 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Suite Suite 210 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible ÙSA USA Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent OLSON, PAUL E 1776 RINGLING BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34238 83 84 City Zip Code 85 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. DELETE Change X Addition TITLE 1.1 TITLE President NAME 1.2 NAME Eugene B. Knippers STREET ADDRESS 1.3 STREET ADDRESS 5510 W. LaSalle Street, Suite 210 CITY-ST-ZIP 1.4 CITY - ST - ZIP Tampa, FL 33607 Change DELETE X Addition 2.1 TITLE TITLE Vice President NAME 2.2 NAME Brian M. Allred STREET ADDRESS 2.3 STREET ADDRESS 5510 W. LaSalle Street, Suite 210 Tampa, FL 33607 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE 61 THILE Change ☐ Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP 14. 1 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.