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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000042498**1. Corporation Name

TELLOR ASSOCIATES, INC.

Principal Place	of Business	Mailing Address					حساب الشياسي	•	•	
6411 66TH AVE NORTH 6411 66TH AVE NORTH										
PINELLAS PARK		PINELLAS PARK FL 3	PINELLAS PARK FL 33781							
							DO NOT WRI	TE IN THIS	SPACE	
							corporated or Qualifed			Ļ
							3/1997		 _	
Principal Place of Business 2a. Mailing Address						4 FEI No			Apr	olied For
21		26	26			59-34	146029		Not	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	Suite, Apt. #, etc.			- Oif-	ate of Status Desired		\$8.75 A	
22		27	27			5.º Certifo	ate of Status Desired		Fee Red	quired
City & State	9	City & State				6 Election	n Campaign Financing		\$5.00	May Be
23 28							und Contribution		Added to	
Zip				ıntry		8 This co	orporation owes the curr	ent vear Inta	angible	
24	25	29	30			7.	al Property Tax.	•		□No
24	9. Name and Address of Curr		00	Т			and Address of New I	Registered	Agent	
9. Name and Address of Current Registered Agent					Name					
TELLOR, PHILLIS M							·	•		
	PARK BOULEVARD		82 Street A			ldress (P.O. Bo	Number is Not Accepta	able)		
	LLAS PARK FL 33781		83							
PINELLAS PARK FL 33/01				83						.
				84	City			FL	85 Zip C	ode
	to the provisions of Sections 607.0	00 4 007 4500 Flide 6	Statutas the s	<u></u>		enoration automi	to this statement for the		changing its	registered
office or re	egistered agent, or both, in the Stat	e of Florida. Such change v	vas authorized	o dv	the corpora	ation's board of	directors. I hereby accep	t the appoir	ntment as reg	jistered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.050	5, Florida Stat	utes		سه جناست	and the same and the same		سيبه سيف	
SIGNATURE		•				-				\
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered					it signature requi			DATE	ID DIDEATA	50 111 40
12.	OFFICERS AND DIRECTORS		13.			ADDITI	ONS/CHANGES TO OF	FICERS AN	Change	Addition
TITLE	D	☐ DELE	TE 1.1 ΤΙ	TLE					□ Change	
NAME	TELLOR, PHYLLIS M		1.2 N	AME	ľ					1
STREET ADDRESS 6411 66TH AVE NORTH				1.3 STREET ADDRESS						
CITY-ST-ZIP	PINELLAS PARK FL 33781		1.4 C	ITY-S	T-ZIP				•••	
TITLE		☐ DELE	TE 2.1 T	TLE					☐ Change	☐ Addition
NAME			. 2.2 N	AME						
STREET ADDRESS			235	TREET	TADDRESS		, ,			- 1
CITY-ST-ZIP				2.4 CITY-ST-ZIP					Change	Addition
TITLE							•		_ ,	_
NAME			3.2 N				•			
STREET ADDRESS					T ADDRESS					}
CITY-ST-ZIP	****				ST-ZIP				Change	☐ Addition
TITLE		☐ DELE	TE 4.1 T	ITLE			•		☐ Change	
NAME			4. 2 N	AME						
STREET ADDRESS			4.3 S	TREE	T ADDRESS	•	,			
CITY-ST-ZIP		_	4.4 C	ITY-S	T-ZIP					
TITLE		☐ DELE	TE 5.1 T	ITLE			•		☐ Change	☐ Addition
NAME			5.2 N	AME		•	•			
STREET ADDRESS			5.3 S	TREE	TADDRESS	**	4			_
}			5.4 C	ITY-S	T-ZIP	-				
CITY-ST-ZIP		□ DELE							Change	Addition
			6.2 N	AME	j				_ •	
NAME					T ADDRESS		-			ł
STREET ADDRESS			0.3 S	INEC	1 VD01/C99					

6.4 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 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, with all other like empowered.

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90125 025 ***150.00