

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S63331

(0)

1. Corporation Name

BELMAC HOLDINGS, INC.

Principal Place of Business

4830 W KENNEDY BLVD
550
TAMPA FL 33609-517
US

Mailing Address

4830 W KENNEDY BLVD
550
TAMPA FL 33609-517
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/28/1991

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-3086006

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PRICE, MICHAEL D
4830 W KENNEDY BLVD #550
SUITE 548
TAMPA FL 33609-2517

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1008, 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 607.0405, Florida Statutes.

SIGNATURE

Signature (use or printed name of registered agent and title if applicable)

NOTE: Registered Agent signature required when (a) changing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

BOULTBEE, DONALD E
4830 W KENNEDY BLVD.
TAMPA FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

delete entirely

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VPD

STOTE, ROBERT M
4830 W KENNEDY BLVD #550
TAMPA FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

✓ D

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

CD

STEWART, RONALD JR.
4830 W KENNEDY BLVD 550
TAMPA FL 17

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

delete entirely

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

ST

PRICE, MICHAEL D.
4830 W KENNEDY BLVD 550
TAMPA FL 17

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

✓ S T D

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

33609
Murphy, James R.
4830 W. Kennedy Blvd, #550
Tampa, FL 33609

☐ Change ☒ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 for an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Michael J. Price
VP CFO

DATE

Signature Number 8