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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S63

S63823

(6)

PAS POWER CO

יוטוו	SHEIT OO:			I K arada na auda dha anda inala	RIBIL BURIL BURIL BURIL BURIL BURIL
Principal Plac	ce of Business	Mailing Address			01011 01011 01011 81011 01411 01411 1041
P.O. BOX 2562 P.O. E		P.O. BOX 2562 TAMPA FL 33601-2562			
				3. Date Incorporated or Qualified 07/02/1991	3a. Date of Last Report 04/09/1996
2, Principal I	Place of Business	2a. Mailing Address		4. FEI Number 59-3080251	Applied For Not Applicable
Suite, Apt	. #, etc	Suite, Apt #, etc.	, , , , , , , , , , , , , , , , , , ,	5. Certificate of Status Desired	\$8.75 Additional
City & Sta	ite	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for i	ntangible tax under s. 199.032,
	9. Name and Address of Curre			10. Name and Address of New Re	
SIN	APSON, NATHAN B.		81 Name		
	1 E MADISON STREET		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
23	RD FLOOR			•	
TAI	MPA FL 33602		83		
			84 City		FL 85 Zip Code
office or	t to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was	s authorized by the corporat	poration submits this statement for the p lion's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
SIGNATURE		AL ALLES	OTC. December 4 and december 400 de		DATE
12.	Signature, typodior printed name of registered ag OFFICERS AN	SONT BITCO LITTLE PROPERTY OF THE SONT SONT SONT SONT SONT SONT SONT SONT	OTE: Registered Agent signature requi	ADDITIONS/CHANGES TO OFFIC	
TITLE	CD	DELETE	1.1 TITLE		Change Addition
NAME	RANKIN, TOM L.		1.2 NAME		
STREET ADDRESS	The state of the s		1.3 STREET ADDRESS		
CITY - ST - ZIP	TAMPA FL		1.4 CITY - ST - ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		Change Addition
NAME	BRABSON, JOHN A. JR		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - SI - ZIP	TAMPA FL	DELETE	2. 4 City-ST-ZIP 3.1 TITLE		Change Addition
TOLE	EV WHITE, E. ELLIOTT	DCLETE	3.2 NAME		C fullange C Addition
NAME STREET ADDRESS			33 STREET ADDRESS		
CITY ST-7IP	TAMPA FL		3 4. City-St-ZiP		
TITLE	T	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	UHL, JACK E.		4. 2 NAME		,
STREET ADDRESS	*** ***		4.3 STREET ADDRESS		
CITY - ST - ZIP	TAMPA FL		4.4 City-St-Zip		
TITLE	SAT	☐ DELETE	.5.1 TITLE		Change Addition
NAME	SCHINDLER, DAVID R.		5.2 NAME		
STREET ADDRESS		A	5.3 STREET ADDRESS		
CITY - ST - 7IF	TAMPA FL	- Intere	5.4 CITY - ST - ZIP		Change Addition
TITLE	C BAHEV BT	DELETE	61 TITLE		Change Addition
NAME Proces approved	BAILEY, B.T. 111 E MADISON STREET	I	6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS	TAMPA FL				
CITY-ST-2IF 14. 1 do hera	eby certify that the information supplied	ed with this filing does not au	6.4 CITY-ST-ZIP alify for the exemption state	d in Section 119.07(3)(i), Florida Statute	s. I further certify that the
informati	on indicated on this annual report or	supplemental annual report is	s true and accurate and that	t my signature shall hâve the same lega rt as required by Chapter 607, Florida S	d effect as if made under oath; that

SIGNATURE:

Jack Z, WKL Jack E. Uhl NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/97

(813) 273-0074

FILED

Apr 21 1997 8:00am

Secretary of State

Daytime Phone #