

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Apr 24 1998 8:00am
Secretary of State

DOCUMENT # V02479 (6)

1. Corporation Name
HAROLD TOBIN & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

4 PINE VISTA DRIVE
E 201
LARGO FL 34640
US

4 PINE VISTA DRIVE
E 201
LARGO FL 34640
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1991

4. FEI Number

59-3099823

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

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 4870 BLUE JAY CIRCLE

2a. Mailing Address

26 4870 BLUE JAY CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 PALM HARBOR, FLA

27 City & State

28 PALM HARBOR, FLA

24 Zip

34683

Country

25 PINELLAS

29 Zip

34683

Country

30 PINELLAS

9. Name and Address of Current Registered Agent

TOBIN, HAROLD M.
4 PINE VISTA DRIVE
E 201
LARGO FL 34640

10. Name and Address of New Registered Agent

81 Name TOBIN, HAROLD M.

82 Street Address (P.O. Box Number is Not Acceptable)
4870 BLUE JAY CIRCLE

83

84 City PALM HARBOR FL 85 Zip Code 34683

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

Harold M. Tobin

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/98

12. OFFICERS AND DIRECTORS

TITLE DPTS
NAME TOBIN, HAROLD M.
STREET ADDRESS 4 PINE VISTA DRIVE
CITY-ST-ZIP LARGO FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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☐ DELETE

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPTS
1.2 NAME TOBIN, HAROLD M.
1.3 STREET ADDRESS 4870 BLUE JAY CIRCLE
1.4 CITY-ST-ZIP PALM HARBOR, FLA 34683

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE

Harold M. Tobin

4/15/98 (23) 943-2447

CR2E034 (10/97)