

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V29444**

(9)

1. Corporation Name

ROSS TOMASELLI CORPORATION



Principal Place of Business

**C/O ROSS, CHARLES
8370 40TH AVENUE NORTH
ST. PETERSBURG FL 33709
US**

Mailing Address

**C/O ROSS, CHARLES
8370 40TH AVENUE N
ST. PETERSBURG FL 33709
US**

3. Date Incorporated or Qualified
04/13/1992

3a. Date of Last Report
03/07/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

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City & State

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Zip

Country

29

30

4. FEI Number
56-3174952

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROSS, CHARLES
8370 40TH AVENUE N
ST. PETERSBURG FL 33709**

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 607.1508, 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 of corporation's duly authorized agent or officer

(2006) Registered Agent Signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

**DP
ROSS, CHARLES W.
5933 GULFPORT BLVD
GULFPORT FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

**DVPS
TOMASELLI, JOEL
1435 CARTECAY DR
ATLANTA GA**

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CITY, ST, ZIP

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