SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **V58713** **(1)**

1. Corporation Name

TAMPA BAY CONTRACTORS, INC.

Principal Place of Business	Mailing Address
3010 GROVEWOOD COURT **SUITE B** **TAMPA FL 33629** **US**	**3010 GROVEWOOD CT.** **SUITE B** **TAMPA FL 33629** **US**

3. Date Incorporated or Qualified: **08/19/1992**
3a. Date of Last Report: **08/11/1995**

4. FEI Number: **NOT APPLICABLE** ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 **3413 Alline Avenue**	26 **3413 Alline Avenue**
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 **Tampa, FL.**	City & State 28 **Tampa, FL.**
Zip 24 **33611** Country 25 **USA**	Zip 29 **33611** Country 30 **USA**

9. Name and Address of Current Registered Agent

BARNHARDT, RANDY V.
3010 GROVEWOOD COURT SUITE B
TAMPA FL 33629

10. Name and Address of New Registered Agent

81 Name: **Randy V. Barnhardt**
82 Street Address (P.O. Box Number is Not Acceptable): **3413 W. Alline Avenue**
83
84 City: **Tampa** **FL** 85 Zip Code: **33611**

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: **Randy V. Barnhardt** 8/1/96
(Signature, typed or printed name of registered agent and date required.)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**PVTS** **BARHARDT, HARRY V** **3107 HIGHVIEW DR** **DADE CITY FL**	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	**Randy Abendschein** **President** **3413 W. Alline Avenue** **Tampa, FL. 33611** ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	**Randy V. Barnhardt** **Treasurer** **3413 W. Alline Avenue.** **Tampa, FL. 33611** ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	**Secetary** **Randy V. Barnhardt** **3413 Alline Avenue** **Tampa, FL. 33611** ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	**Executive Vice President** **Randy V. Barnhardt** **3413 W. Alline Avenue** **Tampa, FL. 33611** ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (3/96)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Harry V. Barnhardt** - **Harry V. Barnhardt** 8/1/96 (813)831-4919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number