

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000003505

FILED  
Feb 20, 2012  
Secretary of State

Entity Name: TAB OF PINELLAS, INC.

**Current Principal Place of Business:**

5180 113TH AVENUE N  
CLEARWATER, FL 33760 US

**New Principal Place of Business:**

**Current Mailing Address:**

5180 113TH AVENUE N  
CLEARWATER, FL 33760 US

**New Mailing Address:**

FEI Number: 59-3455726      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STRICKLAND, THOMAS L  
5180 113TH AVENUE N.  
CLEARWATER, FL 33760 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: STRICKLAND, THOMAS L  
Address: 5180 113TH AVENUE N.  
City-St-Zip: CLEARWATER, FL 33760 US

Title: DVT  
Name: STRICKLAND, BONNIE  
Address: 5180 113TH AVENUE N.  
City-St-Zip: CLEARWATER, FL 33760 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS L. STRICKLAND

DPS

02/20/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date