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May 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # 710601 (6)

1. Corporation Name

ST. PETERSBURG, FLORIDA CHAPTER OF THE SOCIETY F OR THE PRESERVATION AND ENCOURAGEMENT OF BARBER

Principal Place of Business	Mailing Address
3925 14TH LANE NE ST. PETERSBURG FL 33703	3925 14TH LANE NE ST. PETERSBURG FL 33703-5411

3. Date Incorporated or Qualified: 03/25/1966
3a. Date of Last Report: 02/21/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29 — Country — 25 / 30

4. FEI Number: 59-6173077 ☐ 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

FOGLER, NATHANIEL
14929 FEATHER COVE RD
CLEARWATER FL 34622

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	VP DIR.	☒ Change ☐ Addition
NAME	FOGLER, NED		1.2 NAME	FOGLER NED	
STREET ADDRESS	14928 FEATHER COVE		1.3 STREET ADDRESS	14928 FEATHER COVE	
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-ST-ZIP	CLEARWATER, FL	
TITLE	VD	☒ DELETE	2.1 TITLE	P.D.	☐ Change ☒ Addition
NAME	HALL, THOMAS		2.2 NAME	WILLIAM BOLL	
STREET ADDRESS	49 THATCH PALM E		2.3 STREET ADDRESS	1630 MONTEREY DR	
CITY-ST-ZIP	LARGO FL		2.4 CITY-ST-ZIP	CLEARWATER FL	
TITLE	VD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MCCREARY, CLARE		3.2 NAME		
STREET ADDRESS	10550 VILLAGE DR		3.3 STREET ADDRESS		
CITY-ST-ZIP	SEMINOLE FL		3.4 CITY-ST-ZIP		
TITLE	VD	☒ DELETE	4.1 TITLE	TD	☐ Change ☒ Addition
NAME	WILSON, CRAIG		4.2 NAME	ED SIELING	
STREET ADDRESS	455-15 AVE NO		4.3 STREET ADDRESS	3925-14LANE NE.	
CITY-ST-ZIP	ST. PETERSBURG FL		4.4 CITY-ST-ZIP	ST PETE, FL	
TITLE	SD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	CARPENTER, M R		5.2 NAME		
STREET ADDRESS	1910 NORFOLK ST NO		5.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURGE FL		5.4 CITY-ST-ZIP		
TITLE	TD	☒ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BRADSHAW, RAY		6.2 NAME		
STREET ADDRESS	13840 89TH AVE N.		6.3 STREET ADDRESS		
CITY-ST-ZIP	SEMINOLE FL		6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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

SIGNATURE: Ned Fogler 4/29/97 (813) 397 5327