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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710601

1. Corporation Name

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

Principal Place of Business 1630 MONTERY DR CLEARWATER FL 33756-1346 Mailing Address

1630 MONTEREY DR CLEARWATER FL 33756-1346

US

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2. Principal Pl	lace of Business	2a. Mailing Address		3. Date Incorporated or Qualifed			
21 5108	BRITTANY DR. S	26 5108 BRITTAL	MY Dr. Si	03/25/1966			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number	Applied For		
22 UNIT	#701	27 UNIT # 70	<u> </u>	59-6173077	Not Applicable		
City & State	e	City & State		5. Certificate of Status Desired	\$8.75 Additional **		
23 ST, PE	TERSBURG, FL	28 ST. PETERSE		U. Collinate of Sales Poolist	Fee Required		
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 May Be		
24 33715	-153) 25 USA	29 33715-1531 30	USA	Trust Fund Contribution	Added to Fees		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
			81 Name	ROSENTHAL, HERRERT			
BOLL, JR	w		82 Street A	(ddress (P.O. Box Number is Not Acceptable)			
· _	1630 MONTEREY DR			5108 BRITTANY DR. S. #701			
	TER FL 33756		83	•			
000			84 City (7	85 Zip Code		
			- "	OT. PETERSBURG FI	L 33715-1531		
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							
office or n	egistered agent, or both, in the State of m familiar with, and accept the poligation	ons of, Section 617.0603, Elorida	a Statutes.	ration's board of directors. Thereby accept the appl	Sintingia do registerea		
SIGNATURE		Sc. Hole		4/15/9	9		
SIGNATURE	Signature, typed or printed name of registered agent		gistered Agent signature re				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A			
TITLE	VP	⊠ DELETE	1,1 TITLE	VD	Change		
NAME	HEVEL, BRYAN		1.2 NAME	HEVEL, BRYAN			
STREET ADDRESS	6347 57TH AVE N		1.3 STREET ADDRESS	6347 57H NEN	i		
CITY-ST-ZIP	ST PETERSBURG FL 33709		1.4 CITY-ST-ZIP	ST PETERSBURG FL 33709			
TITLE	PD	DELETE	2.1 TITLE	D	Change		
NAME	BOLL, WILLIAM		2.2 NAME	BOLL, WILLIAM 1630 MONTEREY DR,			
STREET ADDRESS	1630 MONTEREY DR.		2.3 STREET ADDRESS		-1		
CITY-ST-ZIP	CLEARWATER FL		2.4 CITY-\$T-ZIP	CLEARWATER FL 33756-134			
TITLE	VD	☐ DELETĒ	3.1 TITLE		Change Addition		
NAME	MCCREARY, CLARE		3.2 NAME	والمنتف المحميدة فالمرابي والتابا والراب	· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS	10550 VILLAGE DR		3.3 STREET ADDRESS				
CITY-ST-ZIP	SEMINOLE FL		3.4. CITY-ST-ZIP				
TITLE	TD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition		
NAME	BAKER, JACK H		4. 2 NAME				
STREET ADDRESS	175 98TH AVE NE		4.3 STREET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33702		44 CITY-ST-ZIP				
TITLE	VP .	DELETE	5.1 TITLE	VD	Change		
NAME	KEOWN, DOUGLAS M		5.2 NAME	KEOWN, DOUGLAS M			
STREET ADDRESS	200 COUNTRY CLUB DR #507			6253 24TH ST S # 173	·		
CITY-ST-ZIP	LARGO FL 33771			ST PETERSBURG FL 33712			
TITLE		☐ DELETE	6.1 TITLE	PD	Change Addition		
NAME				ROSENTHAL HERBERT			
STREET ADDRESS			6.3 STREET ADDRESS	5108 BRITTANY DR. S. #701			
CITY-ST-ZIP			6.4 CITY-ST-ZIP	ST, PETERSBURG, FL 33715-	153		

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

SIGNATURE: SUCH THE OR PRINTED WANTED SIGNING OFFICER OF DIRECTOR

2/15/99

Daytime Phone #

CR2E037 (11/98)