

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 716921 (2)  
1. Corporation Name

**BAYWAY ISLES - POINT BRITTANY THREE CORPORATION, INC.**



Principal Place of Business: 5101 BRITTANY DR. SOUTH ST PETERSBURG FL 33715  
Mailing Address: 5101 BRITTANY DR. SOUTH ST PETERSBURG FL 33715

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/25/1969	3a. Date of Last Report 05/01/1995
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1514593	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
SHIPHORST, ANDREA L. 5101 BRITTANY DRIVE, SO ST PETERSBURG FL 33715				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City

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 PARKER, ROBERT 5130 BRITTANY DRIVE, SOUTH ST. PETE FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD <del>HUGHES, REVA</del> 5130 BRITTANY DRIVE, SOUTH ST. PETE FL	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	Manley, A. Gertrude
STREET ADDRESS		2.3 STREET ADDRESS	5130 Brittany Drive, South
CITY-ST-ZIP		2.4 CITY-ST-ZIP	St. Petersburg, Fl. 33715
TITLE	TD <del>MANLEY A GERTRUDE</del> 5130 BRITTANY DRIVE, SOUTH ST. PETERSBURG FL	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	Bell, Esther
STREET ADDRESS		3.3 STREET ADDRESS	5130 Brittany Drive, South
CITY-ST-ZIP		3.4 CITY-ST-ZIP	St. Petersburg, Fl. 33715
TITLE	SD SKANE, PATRICIA 5130 BRITTANY DRIVE ST. PETE FL	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	Cardonick, Ann
STREET ADDRESS		4.3 STREET ADDRESS	5130 Brittany Drive, South
CITY-ST-ZIP		4.4 CITY-ST-ZIP	St. Petersburg, Fl. 33715
TITLE	D <del>BELL, ESTHER</del> 5130 BRITTANY DRIVE, SOUTH ST. PETE FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: A. Gertrude Manley April 25, 1996 813-866-2655  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (12/95)