

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

**FILED**

**Mar 23 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 717317 (2)**  
1. Corporation Name  
**ST. PETERSBURG COIN CLUB, INC.**



Principal Place of Business <b>P O BOX 7626 ST. PETERSBURG FL 33734-7626 US</b>	Mailing Address <b>P O BOX 7626 ST. PETERSBURG FL 33734-7626 US</b>
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3. Date Incorporated or Qualified <b>10/08/1969</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
4. FEI Number <b>59-2417390</b>		

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

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**ROUSSELL, ROBERT  
1104-17TH AVE N.  
STE 203  
ST. PETERSBURG FL 33704**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BAKER, BILL</b>	1.2 NAME	<b>Robert S. Thompson</b>
STREET ADDRESS	<b>6800 17ST S</b>	1.3 STREET ADDRESS	<b>9985 - 56th PLACE No.</b>
CITY-ST-ZIP	<b>ST PETESBURG FL</b>	1.4 CITY-ST-ZIP	<b>St. Pete FL 33708</b>
TITLE	<b>V</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>SLAG, STEPHEND</b>	2.2 NAME	<b>D LIN OVENHOLTSKI</b>
STREET ADDRESS	<b>5235 20 ST NO</b>	2.3 STREET ADDRESS	<b>17920 - GULF BLVD Apt 2002</b>
CITY-ST-ZIP	<b>ST. PETERSBURG FL</b>	2.4 CITY-ST-ZIP	<b>Redington Shores 33708</b>
TITLE	<b>S</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>IRWIN, EDWARD, B</b>	3.2 NAME	<b>D HARLAND E. JEFFERS</b>
STREET ADDRESS	<b>5200 28TH ST N L529</b>	3.3 STREET ADDRESS	<b>8335 - 59th ST NO</b>
CITY-ST-ZIP	<b>PINELLAS PARK FL</b>	3.4 CITY-ST-ZIP	<b>PINELLAS. PARK FL 33781</b>
TITLE	<b>P</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROUSELL, ROBERT J</b>	4.2 NAME	<b>D JOHN SUTORIUS</b>
STREET ADDRESS	<b>1104-17TH AVE N</b>	4.3 STREET ADDRESS	<b>300-1 81st AVE</b>
CITY-ST-ZIP	<b>ST PETERSBURG FL</b>	4.4 CITY-ST-ZIP	<b>St. Pete Beach FL 33706</b>
TITLE	<b>T</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PENDLEY, BRENDA J</b>	5.2 NAME	
STREET ADDRESS	<b>3840 61 ST N</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ST. PETERSBURG FL</b>	5.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CARNEY, JOHN</b>	6.2 NAME	
STREET ADDRESS	<b>334 48 AVE NO 136</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ST PETERSBURG FL</b>	6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Robert Rousell* **13 March 98**

CR2E037 (1097)