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May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 722141 (9)

1. Corporation Name
TAMPA MARINE INSTITUTE, INC.

Principal Place of Business Mailing Address

2015 GUY N VERGER BLVD TAMPA FL 33605

3. Date Incorporated or Qualified
11/22/1971

4. FEI Number
23-7155996

Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Country 29 Zip 30 Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

HULL, DAVID J
AUSLEY LAW FIRM
227 SOUTH CALHOUN
TALLAHASSEE FL 32302

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

12. OFFICERS AND DIRECTORS

TITLE	TRUS	<input type="checkbox"/> DELETE
NAME	EDWARDS, JOSEPH D	
STREET ADDRESS	P.O. BOX 3433 N/A	
CITY-ST-ZIP	TAMPA FL 33601	
TITLE	PT	<input checked="" type="checkbox"/> DELETE
NAME	LOUIS DAVID DE LA PARTE	
STREET ADDRESS	P.O. BOX 2350 N/A	
CITY-ST-ZIP	TAMPA, FL 33612	
TITLE	PTR	<input type="checkbox"/> DELETE
NAME	LODATO, ANNETTE MS.	
STREET ADDRESS	ONE 24TH AVE.	
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 34635	
TITLE	STR	<input type="checkbox"/> DELETE
NAME	ELLIOTT S. STEELE	
STREET ADDRESS	3100 E. FLETCHER AVE	
CITY-ST-ZIP	TAMPA FL 33602-3361	
TITLE	TR	<input type="checkbox"/> DELETE
NAME	KELLY, STEPHEN D	
STREET ADDRESS	2528 SUNSET DR	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE	TRUS	<input type="checkbox"/> DELETE
NAME	WEAVER, ROBERT S.	
STREET ADDRESS	5915 BENJAMIN DR.	
CITY-ST-ZIP	TAMPA FL 33634	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	See Attachment
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 S. Weaver 4/23/98 813-887-3300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0048 120

CR2E037 (10/97)

Tampa Marine Institute

2015 Guy N. Verger Boulevard, Tampa, FL 33605 -- Tel. (813) 248-5091 -- Fax (813) 247-3998

Board of Trustees

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Hillsborough County Sheriff's Office
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1103 North 22nd Street, Suite F
Tampa, FL 33605
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Ms. Annette Lodato
Chairman
2308 Beach Trail
Indian Rocks Beach, FL 33785
Day: (813) 595-8981 (eve. also)
Fax: (813) 879-4321 595-8982
Alt. (813) 962-8981

Ms. C. Suzanne Reeves
Merry Heart, Inc.
17819 Sunrise Drive
Lutz, FL 33549
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~~Mr. Lance Ringhaver
Ringhaver Equipment Company
P.O. Box 30169
Tampa, FL 33630-0169
Day: (813) 671-3700~~

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Mr. Elliott S. Steele
Secretary
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Mr. Robert S. Weaver (Bob)
Associated Marine Institutes
5915 Benjamin Center Drive
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Alt. () 542-4888 SUNCOM

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