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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 730206

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THE HILLSBOROUGH COMMUNITY COLLEGE FOUNDATION, I NC.

Principal Plac	e of Business		Mailing Address			I TORNH HEEDE HINN EUND HEAT		TIER OUR OUR	
39 COLUMBI P.O.BOX 311 TAMPA FL. 3	127 (336313127)		39 COLUMBIA DRIVE P.O.BOX 31127 (3363 TAMPA FL. 33606-358	13127)					
	·					<ol> <li>Date Incorporated or Qualit</li> <li>07/16/1974</li> </ol>	fied 3a.	Date of Last 01/30/1	
2. Principal P	Place of Business	<b>⊢</b>	2a. Mailing Address	-		4. FEI Number 59-1810717		<del></del>	Applied For Not Applicable
Suite, Apt.	. #, etc.	2	Suite, Apt. #, etc.			5. Certificate of Status Desired	d 🔲	\$8.7	5 Additional Required
Orty & Stat	te	2	City & State			Election Campaign Financia     Trust Fund Contribution	, D	\$5.0	May Be
Zip 4	Countr 25	<b>^</b>	Zip	Country		8. This corporation has liability		tax under s	
<u> </u>	9. Name and Addre		gistered Agent	30		Florida Statutes  10. Name and Address of No.	Yes X		
				81	Name		an Lagistoto	o Agent	· · · · · · · · · · · · · · · · · · ·
	JOHN W., JR			82	5C	lem, Richard J.	-4-6-1-1		. <u>.</u>
	ennedy blvd.			62	Street Addit	ess (P.O. Box Number is Not Acce 11 E. Kennedy Bivd	iptabiej ◆		
SUITE 8				83	_	ite 3200			
TAMPA	FL 33601			84	City _			PE   7	o Codo
		,				mpasqn	F	L 85 Zi	33662
<ol> <li>Pursuant or registe</li> </ol>	to the provisions of Sect red agent, or both, in the	ons 617.0502 and State of Florida. Si	617.1508, Florida State uch change was author	tes, the above-na	amed corport	ation submits this statement for the	pulpose of c	hanging its r	egistered offic
familiar wi	ith, and accept the obliga	tions of, Section 6	17.0503, Florida Statute	98.	ration 3 byan	d bi mac his. Thereby stoops the	appointment a	is registered	agent.iam
		~ ~ ~ ~ ~ ~							, ,
SIGNATURE	KICHARD .	J. SAEM				<u>0</u>		30-9	6
SIGNATURE	Signature typed or printed name	J. SAM of registered agent and tall	e if applicable. (1	vOTE: Registered Agent			DATE		<u> </u>
IGNATURE 2.	Signature typed or printed name	J. SAEM	e if applicable. (*RECTORS	13.	signatur required	ADDITIONS/CHANGES TO	DATE	ID DIFFECTO	DRS IN 12
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SIGNATURE: JAMES R. MEHUTRETTER 1.24.96 813 251-0074