


FILE NOW: FILING FEE IS \$61.25

FILED
Mar 18 1998 8:00am
Secretary of State

• NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortyham , Secretary of State DIVISION OF CORPORATIONS
		DOCUMENT # 738301 (1) 1. Corporation Name TAMPA CROSSROADS, INC.



Principal Place of Business: **5120 N. NEBRASKA AVENUE TAMPA FL 33603**
 Mailing Address: **5120 N. NEBRASKA AVENUE TAMPA FL 33603**

3. Date Incorporated or Qualified: **03/08/1977**

4. FEI Number: **59-1743719**
 Applied For: Not Applicable:

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

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

9. Name and Address of Current Registered Agent

HANLON, JAMES
101 E. KENNEDY BLVD.
SUITE 1500
TAMPA FL 33602

10. Name and Address of New Registered Agent

81. Name
 82. Street Address (P.O. Box Number is Not Acceptable)
 83.
 84. City
 85. Zip Code **FL**

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: *James R. Hanlon* DATE: **1/21/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD PARKHILL, HELEN	1.1 TITLE	CD FERRARO, JOSEPH
STREET ADDRESS	300 S. HYDE PARK AVE., SUITE 150	1.2 NAME	1511 N. WESTMORE BLVD, SUITE 600
CITY-ST-ZIP	TAMPA FL 33606	1.3 STREET ADDRESS	TAMPA FL 33607-4523
TITLE	CEO HARRIS, ARNDREETA	1.4 CITY-ST-ZIP	
STREET ADDRESS	10740 N. 58TH ST.	2.1 TITLE	CEO KEVIN CAREY
CITY-ST-ZIP	TAMPA FL 33617	2.2 NAME	P.O. BOX 3239 N/A
TITLE	SD STECK, BARBARA	2.3 STREET ADDRESS	TAMPA FL 33601
STREET ADDRESS	202 N. GRADY AVE.	2.4 CITY-ST-ZIP	
CITY-ST-ZIP	TAMPA FL 33609	3.1 TITLE	SD COL. DAVID PARRISH
TITLE	IPCD KANE, MARK	3.2 NAME	P.O. BOX 3371 N/A
STREET ADDRESS	702 N FRANKLIN ST	3.3 STREET ADDRESS	TAMPA FL 33601
CITY-ST-ZIP	TAMPA FL 33601	3.4 CITY-ST-ZIP	
TITLE	PCEO PLANT, PETER	4.1 TITLE	
STREET ADDRESS	6 FORESTALL ROAD	4.2 NAME	
CITY-ST-ZIP	TAMPA FL	4.3 STREET ADDRESS	
TITLE		4.4 CITY-ST-ZIP	
STREET ADDRESS		5.1 TITLE	
CITY-ST-ZIP		5.2 NAME	
TITLE		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	
TITLE		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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TITLE		4.4 CITY-ST-ZIP	
STREET ADDRESS		5.1 TITLE	
CITY-ST-ZIP		5.2 NAME	
TITLE		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	
TITLE		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *James R. Hanlon*, TREASURER DATE: **1/21/98** **813-229-0221**

CR2E037 (10/97)