

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **742593**
1. Corporation Name
PINELLAS GEOLOGICAL SOCIETY, INC.

Principal Place of Business Mailing Address
2284 SPANISH DR. APT. 48 P.O. BOX 6263
CLEARWATER, FL. 34623 CLEARWATER
FL. 34618

3. Date Incorporated or Qualified MARCH 31, 1978	3a. Date of Last Report APRIL 1, 1996
4. FEI Number NOT APPLICABLE	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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

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 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Mimi LEVITE (T) 2284 SPANISH DR. #48 CLEARWATER FL. 34623	81 Name Mimi LEVITE 82 Street Address (P.O. Box Number is Not Acceptable) 2284 SPANISH DR #48 83 84 City CLEARWATER FL 34623

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 **Mimi Levite, Treas.**

3/21/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TOM BENHAM (P) ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	1936 COBBLESTONE WAY	1.2 NAME	
STREET ADDRESS	CLEARWATER, FL. 34620	1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	KATHI BARRETT (V) ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	11590 WALKER AVE.	2.2 NAME	
STREET ADDRESS	SEMINOLE, FL. 34642	2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	ESTHER GOLDMAN ☐ DELETE (S)	3.1 TITLE	☐ Change ☐ Addition
NAME	2351 IRISH LANE #29	3.2 NAME	
STREET ADDRESS	CLEARWATER, FL. 34623	3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	MIMI LEVITE (T) ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	2284 SPANISH DR. #48	4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	ELAINE ROUBIK (D) ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	347 RANCH ROAD	5.2 NAME	
STREET ADDRESS	TARPON SPRINGS FL. 34689	5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	SUE BLACK (D) ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	8136 22ND AVE. N. →	6.2 NAME	
STREET ADDRESS	ST. PETERSBURG, FL. 33710	6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	
		5.5 TITLE	200002126462 ☐ Change ☐ Addition
		5.6 NAME	-03/27/97--01109--027
		5.7 STREET ADDRESS	***61.25
		6.5 TITLE	OLAF VAUGHT (D) ☐ Change ☐ Addition
		6.6 NAME	10280 IMPERIAL PT. DR. W. #7
		6.7 STREET ADDRESS	LARGO, FL. 34644
		6.8 CITY - ST - ZIP	

14. I do 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: **Mimi Levite, Treas.**

3/21/97 813-797-0755

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MIMI LEVITE

Date Daytime Phone #

CR2E037 (9/96)