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**Secretary of State**

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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 748176**

1. Corporation Name

**THE GREATER TAMPA ASSOCIATION OF REALTORS, INC.**

Principal Place of Business

2918 W KENNEDY BLVD  
TAMPA FL 33609-0195

Mailing Address

2918 W KENNEDY BLVD  
TAMPA FL 33609-0195



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

07/24/1979

4. FEI Number

59-0474867

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

9. Name and Address of Current Registered Agent

AUSTIN, CAROL A.  
2918 W. KENNEDY BLVD.  
TAMPA FL 33609

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 P ☐ DELETE

NAME GLASER, ROBERT P  
STREET ADDRESS 3801 BAY TO BAY BLVD  
CITY-ST-ZIP TAMPA FL 33629

TITLE PE ☐ DELETE

NAME JOHNSON, C  
STREET ADDRESS 234-A BULLARD PKWY  
CITY-ST-ZIP TEMPLE TERRACE FL 33617

TITLE T ☐ DELETE

NAME RAZZANO, KATHLEEN L.  
STREET ADDRESS 12000 N. DALE MABRY S-140  
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE

NAME DORAZIO, J  
STREET ADDRESS 3401 W CYPRESS ST  
CITY-ST-ZIP TAMPA FL 33607

TITLE D ☐ DELETE

NAME POLO, JR M  
STREET ADDRESS 12966 N DALE MABRY HWY  
CITY-ST-ZIP TAMPA FL 33618

TITLE D ☐ DELETE

NAME JACOB, J C  
STREET ADDRESS 1200 W PLATT ST  
CITY-ST-ZIP TAMPA FL 33606

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME Connie Johnson  
1.3 STREET ADDRESS 10960 N. 56th Street  
1.4 CITY-ST-ZIP Temple Terrace, Fla. 33617-5512

2.1 TITLE President - Elect ☒ Change ☐ Addition

2.2 NAME Tom Scaglione  
2.3 STREET ADDRESS 12966 N. Dale Mabry  
2.4 CITY-ST-ZIP Tampa, Florida 33618

3.1 TITLE Treasurer ☒ Change ☐ Addition

3.2 NAME Don Harding  
3.3 STREET ADDRESS 3801 Bay to Bay Blvd  
3.4 CITY-ST-ZIP Tampa, Florida 33609

4.1 TITLE Secretary ☒ Change ☐ Addition

4.2 NAME Jean Dorazio  
4.3 STREET ADDRESS 3401 W. Cypress St.  
4.4 CITY-ST-ZIP Tampa, Florida 33607

5.1 TITLE Director ☒ Change ☐ Addition

5.2 NAME Jim Jacob  
5.3 STREET ADDRESS 1200 W. Platt Street  
5.4 CITY-ST-ZIP Tampa, Florida 33606

6.1 TITLE Director ☒ Change ☐ Addition

6.2 NAME Jack Rodriguez  
6.3 STREET ADDRESS 216 Shorecrest Dr.  
6.4 CITY-ST-ZIP Tampa, Florida 33609

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, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

11/18/99

813-879-7010

CR2E037 (1/98)