FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

· — — — — — — — — — — — — — — — — — — —				
DOCUMENT # 762267				
SARASOTA BRADENTON VENICE ADVERTISING FEDERATION				
WC.	NICE HOVERTISIA	IC FEDERATIO	ow	
Principal Place of Business	Mailing Address			
4070 WESTBOURNE CIR P.D. BOX 49843			Date Incorporated or Qualified	
SARASOTA FL 34238 SARASOTA FL			03/03/1982	İ
us 4238		_ 14230	4. FEI Number	Applied For
			59-2412389	Not Applicable
2. Principal Place of Business 2a. Mailing Address			5. Certificate of Status Desired	\$8.75 Additional
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.				Fee Required
22 27			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State City & State			7. Is this nonprofit corporation a homeowner	
23	28			□ No
Zip Country	Zıp	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24 25 Name and Address of Curre		30		Yes No
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Name and Address of New Registered Agent				
HUE, W. GRADY				50
2201 RINGLING BLVD.			dress (P.O. Box Number is Not Acceptable)	
		83		
SARASOTA FL 31577		54 City	450T4 Fla 34236	
· · · · · · · · · · · · · · · · · · ·		1 1 - 7	FL	85 3423L
11. Pursuant to the provisions of Sections 017,0502 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.				
agent. I am familiar with, and occept the obligations of, Section 617.0503, Florida Statutes.				
SIGNATURE Signature typed or prophy named of rogistered agent and rille if applicable (NOTE Registered Agent signature required when reinstating) DAT				
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE V.	☐ DELETE	1.1 TITLE		Change Addition
NAME CAMPBELL, ED		12 NAME	ampbell, ed	•
STREET ADDRESS 1501 LAUAEL ST. #102		1.3 STREET ADDRESS 4	4904 DAK LEAF DR.	
CITY-SI-ZIP SARASOTA FL 34236		1.4 CITY-S1-ZIP	SARASOTA FL 34233	
NAME	☐ DELETE	2.1 TITLE	,	Change P Addition
NAME STREET ADDRESS			BELL, DEBOILE	
CITY-ST-ZIP			585 71st ST. W #192	
TITLE T.	DELETE	2.4 CHY-SI-ZIP 15 /	RHOENTON FL 34210	☐ Change ☐ Addition
man like a c		3.2 NAME	1000025811	_ • · · · ·
STREET ADDRESS 4070 WESTBOURNE CIR		3 3 STREET ADDRESS	-07/07/98010100	
CITY-ST-ZIP SARASOTA FL 34238		3 4. CITY-ST-ZIP	***61.25	

DELETE 5.1 TITLE Addition Change NAME 5.2 NAME HARDING, KAREN STREET ADDRESS 5.3 STREET ADDRESS 550 BIADLE LANE CITY-ST-ZIP 5 4 CITY - ST - ZIP LONGBOAT KEY FL 34228 TITLE DELETE 61 TITLE Change

4.1 TITLE

4. 2 NAME

4 3 STREET ADORESS

4.4 CITY-ST-ZIP

SMITH, STEVE 7001 23rd AVE. W.

BRADENTON, FL 34204

6.2 NAME BILKIE, DAVE STREET ADDRESS 6.3 STREET ADDRESS 2065 CANTU COURT

□ DELETE

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 changes or on an attachment with an address.

SIGNATURE:

TITLE

NAME

NAME

STREET ADDRESS

CITY-ST-ZIP

6/26/08 941-918-0122

Change

FILED

Jul 06 1998 8:00am

Secretary of State