

FILE NOW: FILING FEE IS \$61.25

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Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90046 050 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N28573

1. Corporation Name
TAMPA BAY BUSINESS COMMITTEE FOR THE ARTS, INC.

Principal Place of Business 400 N TAMPA ST #1060 TAMPA FL 33602 US	Mailing Address P O BOX 559 P.O. BOX 559 TAMPA FL 33601 US
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2. Principal Place of Business	2a. Mailing Address	3. Date incorporated or Qualified 09/28/1988
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-2948216
22 City & State	27 City & State	Applied For Not Applicable
23 Zip	28 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24 Zip	29 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent RUDOLPH, FRANCES 400 N. ASHLEY DRIVE SUITE 3400 TAMPA FL 33602	10. Name and Address of New Registered Agent 81 Name <u>Same</u> 82 Street Address (P.O. Box Number is Not Acceptable) <u>400 N. Tampa St.</u> 83 <u>Suite 1060</u> 84 City <u>Tampa</u> FL 85 Zip Code <u>33602</u>
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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 *Francis J. Rudolph* Executive Director DATE 2/3/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZINOBER, PETER	1.2 NAME	DS Mike Foley
STREET ADDRESS	201 E. KENNEDY BLD. #1750	1.3 STREET ADDRESS	490 First Ave. S.
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	St. Petersburg, FL 33731-1121
TITLE	DS <input checked="" type="checkbox"/> DELETE	2.1 TITLE	DV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HEPPNER, REBEKAH	2.2 NAME	Vince Pavese
STREET ADDRESS	3001 N. ROCKY POINT DR. #160	2.3 STREET ADDRESS	11601 Roosevelt Dr.
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	St. Petersburg, FL 33716
TITLE	DV <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANK, STACY	3.2 NAME	
STREET ADDRESS	400 NORTH ASHLEY ST., SUITE 2300	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33602	3.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	4.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUTH BARNESKINSOLVING	4.2 NAME	
STREET ADDRESS	P O BOX 3239 N/A	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33601	4.4 CITY-ST-ZIP	
TITLE	DT <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MITCHELL, NANCY	5.2 NAME	
STREET ADDRESS	101 E KENNEDY BLVD #2200	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33602	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		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, with all other like empowered.

SIGNATURE: *Francis J. Rudolph* **REQUIRED** DATE 2/3/99 Daytime Phone #

CR2E037 (11/98)