**FILED** FILE NOW: FILING FEE IS \$61.25 May 06 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # N29649 (3) FRIENDS OF TAMPA RECREATION, INC. Principal Place of Business Mailing Address MOONALD SALTZMAN C/O JOSEPH ABRAHAMS 3. Date Incorporated or Qualified 1420 N. TAMPA STREET 1420 N. TAMPA STREET 12/12/1988 TAMPA FL 33602 TAMPA FL 33602 Applied For 59-2920852 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 风 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 8. Election Campaign Financing 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowne association? Yes Yes 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name ABRAHAMS, JOSEPH Street Address (P.O. Box Number is Not Acceptable) 1420 N TAMPA ST. 83 **TAMPA FL 33602** 84 City Zip Code 85 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. aeus inled name of registered agent and title if applicab (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change Addition SCHECT, NEAL NAME 1.2 NAME 101 E. KENNEDY BLVD. STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE ABRAHAMS, JOE NAME 2.2 NAME 306 E. JACKSON STREET STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TETLE 3.1 TITLE GOLD, HERB NAME 3.2 NAME 2413 BAYSHORE BLVD. #170 STREET ADDRESS 3.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETÉ Change Addition TITLE 4.1 TITLE LENKER, MARK NAME 4.2 NAME 324 S HYDE PARK AVE 230 STREET ADDRESS 4.3 STREET ADDRESS TAMPA FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE SUAREZ, JIM A. 5.2 NAME NAME

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.

5.3 STREET ADDRESS

**6.9 STREET ADDRESS** 

8.4 CITY - ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

**6.2 NAME** 

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

3601 N NEBRASKA AVE

2911 TIMBERKNOLL DRIVE

TAMPA FL

BELL, JEFFREY

**VALRICO FL** 

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DELETE

Treas 4/21/9

1/21/98

Davidens Phono d

Change

Addition

E037 (10/97)