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NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # N33367

1. Corporation Name

BAY AREA JAPANESE AMERICAN SOCIETY, INC.

Principal Place of Business

6444 31ST TERR N  
 ST PETERSBURG FL 33710  
 US

Mailing Address

BOX 40594  
 ST PETERSBURG FL 33743



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

3. Date Incorporated or Qualified

07/24/1989

4.- FEI Number

59-2960081

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

YATES, GERALD B.  
 6444 31ST TERRACE NORTH  
 ST PETERSBURG FL 33710

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 DP  DELETE  
 NAME YATES, GERALD B  
 STREET ADDRESS 6444 31ST TERRACE NORTH  
 CITY-ST-ZIP ST PETERSBURG FL

TITLE T  DELETE  
 NAME LYONS, KONIKO  
 STREET ADDRESS 11945 108 AVE N  
 CITY-ST-ZIP LARGO FL

TITLE DS  DELETE  
 NAME GRIMM, CATHY  
 STREET ADDRESS 6444 31 TERR NO  
 CITY-ST-ZIP ST PETERSBURG FL 33710

TITLE VP  DELETE  
 NAME FOMILLO, DEAN  
 STREET ADDRESS 7685 HARBOR VIEW WAY N  
 CITY-ST-ZIP SEMINOLE FL 33776

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition  
 2.2 NAME KUNIKO  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS 3099 Coquina Key Dr SE  
 3.4 CITY-ST-ZIP St. Petersburg FL 33705

4.1 TITLE  Change  Addition  
 4.2 NAME DEAN, FUMIKO  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Gerald B. Yates* REQUIRED

Date

Daytime Phone #

2 10 99 1277 527 8530

CR2E037 (1/198)