

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90007 002 ****61.25

DOCUMENT # N33367

1. Entity Name

BAY AREA JAPANESE AMERICAN SOCIETY, INC.

Principal Place of Business

Mailing Address

6444 31ST TERR N
 ST PETERSBURG FL 33710
 US

BOX 40594
 ST PETERSBURG FL 33743

A0012348



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3099 Coquina Key DR SE

City & State

City & State

St. Petersburg FL

4. FEI Number

59-2960081

Applied For

Not Applicable

Zip

Country

Zip

Country

33705

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Kazuko Malatino

Street Address (P.O. Box Number is Not Acceptable)

6444 31 Terrace No

City

St. Petersburg

FL

Zip Code

33710

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Kazuko Malatino

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01-13-01

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE DP Change Addition
 NAME Kazuko Malatino
 STREET ADDRESS 6444 31 Terrace No
 CITY-ST-ZIP St. Petersburg FL 33710

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

TITLE VP Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DS Delete
 NAME GRIMM, CATHY
 STREET ADDRESS 3099 COQUINA KEY DR SE
 CITY-ST-ZIP ST PETERSBURG FL 33705

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE T Change Addition
 NAME Yukiko UIm
 STREET ADDRESS 859 Snell Isle Blvd NE
 CITY-ST-ZIP St. Petersburg FL 33704

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cathy Grimm
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-01 727-328-6603
 Date Daytime Phone #

CR2E037 (10/00)