

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N36996 (9)**

1. Corporation Name

AMERICAN FEDERATION OF MUSICIANS TAMPA BAY, LOCA L 427-721, INC.



Principal Place of Business

Mailing Address

5175 ULMERTON ROAD
CLEARWATER FL 34620
US

P.O. BOX 12333
ST. PETERSBURG FL 33733
US

3. Date Incorporated or Qualified **03/09/1990** 3a. Date of Last Report **04/19/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number **59-0371362** 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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**O'CONNOR PAUL R.
4388-50TH PLACE SOUTH
ST. PETERSBURG FL 33711**

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 registering

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	V/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIEBERN, ROBERT	1.2 NAME	
STREET ADDRESS	9938 39TH WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	PINELLAS PARK FL	1.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BANNON, JOHN	2.2 NAME	Hutchinson, Carlisle
STREET ADDRESS	6401-23RD LANE, N.	2.3 STREET ADDRESS	3403 Lightner Dr.
CITY-ST-ZIP	ST. PETERSBURG FL	2.4 CITY-ST-ZIP	Tampa, FL 33629
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	POWELL, WARREN H	3.2 NAME	Verdi, J.P. (Buddy)
STREET ADDRESS	1344-35TH AVENUE, N.	3.3 STREET ADDRESS	23251 Wilshire Dr
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	Palm Harbor, FL 34683
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	
NAME	RICE, CHARLES A.	4.2 NAME	
STREET ADDRESS	11780 110TH TER N.	4.3 STREET ADDRESS	
CITY-ST-ZIP	LARGI FL	4.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SPARROW, RICHARD	5.2 NAME	Henderson, John (Randy)
STREET ADDRESS	1219 E. BROAD ST	5.3 STREET ADDRESS	2322 Indigo Dr.
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	Clearwater, FL 34623
TITLE	STD <input type="checkbox"/> DELETE	6.1 TITLE	
NAME	O'CONNOR, PAUL R	6.2 NAME	
STREET ADDRESS	4388 50TH PL S.	6.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Paul R. O'Connor

(Paul R. O'Connor)

3/12/96

(813)572-7977

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

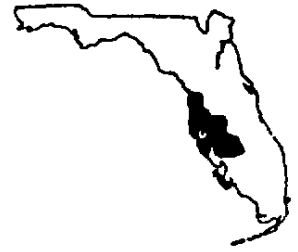
CR2E037 (12/95)



Affiliated with AFL-CIO

**American Federation of Musicians
Tampa Bay, Local 427-721**

P.O. Box 12333
St. Petersburg, FL 33733
St. Petersburg (813) 572-7977



136996

Charles Rice, Pres.
Paul O'Connor, Sec./Treas.

NONPROFIT CORPORATION ANNUAL REPORT 1996

Additions:

D
Menendez, Frank E.
17600 Brown Rd.
Odessa, FL 33556

D
Vinas, Robert
5230 72nd Ave N
Pinellas Park, FL 34665

D
Thomas, Alan C.
5306 Central Ave
Tampa, FL 33603