FILE NOW: FILING FEE IS $61.25

FILED
Apr 19, 1999 8:00 am
Secretary of State
04-19-1999 90045 021 ****61.25

0050159

NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # N39433

1. Corporation Name
THE TAMPA BAY ADVERTISING FEDERATION, INC.

Principal Place of Business	Mailing Address
~~4319 EHRLICH RD~~ 3641 W. KENNEDY BLVD ~~TAMPA FL 33624~~ TAMPA ~~US~~ FLA 33609	~~4319 EHRLICH RD~~ 3641 W. KENNEDY BLVD. ~~TAMPA FL 33624~~ TAMPA ~~US~~ FLA 33609

2. Principal Place of Business	2a. Mailing Address
21 3641 W. KENNEDY BLVD	26 3641 W. KENNEDY BLVD.
Suite, Apt. #, etc. 22 SUITE #C	Suite, Apt. #, etc. 27 SUITE #C
City & State 23 TAMPA FLA	City & State 28 TAMPA FLA
Zip / Country 24 33609 25 USA	Zip / Country 29 33609 30 USA

3. Date Incorporated or Qualified: 08/01/1990

4. FEI Number: 59-3072029 ☐ Applied For ☐ Not Applicable

5. Certifcate 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

KOSTROSKI, LOIS M
4319 EHRLICH RD
TAMPA FL 33624

10. Name and Address of New Registered Agent

81 Name: JANICE I. BUTTERFIELD
82 Street Address (P.O. Box Number is Not Acceptable): 3641 W. KENNEDY BLVD.
83: Suite C
84 City: TAMPA FL 85 Zip Code: 33609

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: J. Butterfield JANICE BUTTERFIELD EXEC. DIRECTOR 4-15-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ORISCENZO, JEENI 3077 CASA DEL SOL SUITE 201 CLEARWATER FL 34621	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D CRISCENZO, JEENI 3077 CASA DEL SOL, SUITE 201 CLEARWATER, FL 34621	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WATSON, STEVE 1022 MAIN ST DUNEDIN FL 34698	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D NEREIM, KENT 15351 Roosevelt Blvd. CLEARWATER, FLA 33760	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEBERT, JACK 2861 EXECUTIVE CENTER DRIVE #100 CLEARWATER FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D GREER, GARY 1003 LAKE RIDGE DR. SAFETY HARBOR, FL 34695	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOOS, ANDREW 3014 HARTIO ST. TAMPA FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KAVIN, MARY 12150-28TH ST. N. ST. PETERSBURG FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D KAVIN, MARY 2390 26th Avenue N. St. Petersburg, FL 33713	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

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 REQUIRED~~ J. Butterfield JANICE BUTTERFIELD 4/13/99 813-874-2122
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)