

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

FILED
93 JUL 24 PM 3:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000004301 (8)

1. Corporation Name

NATIONAL DOMINO ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3103 N. HOWARD AVE.
TAMPA FL 33607

1211 W. FLETCHER AVE.
TAMPA FL 33612-3363
US

3. Date Incorporated or Qualified

09/23/1993

4. FEI Number

59-3203558

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOONEY, MARK F
1211 W. FLETCHER AVE.
TAMPA FL 33612

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 relistening)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME MATASSINI, PAT
STREET ADDRESS 1211 W. FLETCHER
CITY-ST-ZIP TAMPA FL

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

TITLE D DELETE
NAME SOINOS, LOU
STREET ADDRESS 1211 W. FLETCHER
CITY-ST-ZIP TAMPA FL

2.1 TITLE Change Addition
2.2 NAME 500002575785-
2.3 STREET ADDRESS -06/30/98--01022--005
2.4 CITY-ST-ZIP *****61.25 *****61.25

TITLE D DELETE
NAME MATASSINI, MATTHEW
STREET ADDRESS 1211 W. FLETCHER
CITY-ST-ZIP TAMPA FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME Teresa Fernandez
STREET ADDRESS 1211 W. Fletcher
CITY-ST-ZIP Tampa FL 33612

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

TITLE D DELETE
NAME Soinos, Lou
STREET ADDRESS 1211 W. Fletcher
CITY-ST-ZIP Tampa FL 33612

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

TITLE DELETE
NAME
STREET ADDRESS
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.

SIGNATURE

PAT MATASSINI

4-27-98

CR2E037 (10/97)