

**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 # **N33210** (8)  
1. Corporation Name  
**THE 301 HOUSE, INC.**



Principal Place of Business: ~~8868 NORTH 301 HIGHWAY TAMPA FL 33637~~  
Mailing Address: **8601 BOWLES ROAD TAMPA FL 33637 US**

3. Date Incorporated or Qualified: **07/10/1989**  
3a. Date of Last Report: **08/10/1995**

21	2. Principal Place of Business <b>8601 Bowles Rd</b>	26	2a. Mailing Address	4.	FBI Number <b>59-2961828</b>	Applied For	
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	Certificate of Status Desired	<input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23	City & State	28	City & State	6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24	Zip	25	Country	29	Zip	30	Country
				8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No		

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**ZIMMERMAN, SUSAN  
6606 TRAVIS BLVD.  
TAMPA FL FL**

81	Name	
82	Street Address (P.O. Box Number is Not Acceptable)	
83		
84	City	
85	Zip Code	<b>FL 33610</b>

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>ED</b>	1.1 TITLE	<b>ED</b>
NAME	<b>GODWIN, MIKE</b>	1.2 NAME	<b>Kathy Horne</b>
STREET ADDRESS	<b>10040 HARNEY ROAD</b>	1.3 STREET ADDRESS	<b>3813 N 53RD ST</b>
CITY-ST-ZIP	<b>TAMPA FL</b>	1.4 CITY-ST-ZIP	<b>TAMPA FL 33614</b>
TITLE	<b>VC</b>	2.1 TITLE	<b>VC</b>
NAME	<b>WHITE, KEN</b>	2.2 NAME	<b>Frank Hatcher</b>
STREET ADDRESS	<b>P.O. BOX 290741 N/A</b>	2.3 STREET ADDRESS	<b>4205 BOSTON RD</b>
CITY-ST-ZIP	<b>TAMPA FL</b>	2.4 CITY-ST-ZIP	<b>PLANT CITY FL 33566</b>
TITLE	<b>SECD</b>	3.1 TITLE	
NAME	<b>SMITH, LYNDA A</b>	3.2 NAME	
STREET ADDRESS	<b>12803 CARLTON ROAD</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>THONOTOSASSA FL</b>	3.4 CITY-ST-ZIP	
TITLE	<b>TD</b>	4.1 TITLE	
NAME	<b>ZIMMERMAN, SUSAN</b>	4.2 NAME	
STREET ADDRESS	<b>6606 TRAVIS BLVD</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>TAMPA FL</b>	4.4 CITY-ST-ZIP	
TITLE	<b>S</b>	5.1 TITLE	<b>800001842028</b>
NAME	<b>WHITE, KEN</b>	5.2 NAME	<b>-05/29/96--01022--016</b>
STREET ADDRESS	<b>P. O. BOX 290741 N/A</b>	5.3 STREET ADDRESS	<b>***61.25</b>
CITY-ST-ZIP	<b>TAMPA FL</b>	5.4 CITY-ST-ZIP	
TITLE	<b>D</b>	6.1 TITLE	<b>GARY MADRAN-D</b>
NAME	<b>KLINGMAN, DONALD</b>	6.2 NAME	<b>6605 William Rd</b>
STREET ADDRESS	<b>6806 N 301 HIGHWAY</b>	6.3 STREET ADDRESS	<b>THONOTOSASSA FL 33594</b>
CITY-ST-ZIP	<b>TAMPA FL</b>	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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)