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

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Mar 07 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # 73

SIGNATURE:

732815

(6)

THE PO' FELLERS, INC.

Principal Place of Business Mailing Address								1111 81811 8	1841 B1811 G1814 (	11811 <b>019</b> 11 ( <b>83</b> 1	
9200 96TH AVE. NORTH         \$200 98TH AVE. NORTH           SEMINOLE FL 34647         SEMINOLE FL 33777-1724											
							3. Date Incorporated or Qualified 05/21/1975	3a. D	04/24/19		]
2. Principal P	lace of Business		2a. Mailing Address 26				4. FEI Number 59-2978576	Applied For Not Applicable			-
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Regulred				1
City & State	e		City & State				6. Election Campaign Financing \$5.00 May Be				1
23		28					Trust Fund Contribution Added to Fees				]
Zip 24	Country 25	Zip	<u> </u>				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
[24]	25   29   9. Name and Address of Current Registered Agent			30	Т		Florida Statutes				-
	J. 11-110 110 110 01 00 01				81	Name	IV. Hallo alla Radiose di Noti Itali	grotor ou	Agoin		1
FICHER	RICHARD										
EICHER, RICHARD 9200 98 AVE N				82	Street Addr	ress (P.O. Box Number is Not Acceptable)					
	LE FL 34647				83			<del>" ' '</del>			1
					84	City			<b>85</b> Zip	Code	-
		11.11			Ш			<u>FL</u>	.   `   `		_
office or r agent. La	to the provisions of Sections 617.05 egistered agent, or both, in the Sta m familiar with, and accept the obj	ite of Florida. Such igations of, Section	change was a 617.0503, Fk	es, the a authorize orida Sta	ibove id by tutes	e-named corp the corporat s.	oration submits this statement for the pion's board of directors. I hereby accep	urpose of the ap	of changing in pointment as	its registered s registered	
SIGNATURE	The inhand	· Ende	~~					ク3-	01-	97	]
10		agent and title if applicable	. (NOT	· · · · · · · · · · · · · · · · · · ·	d Age	nt signature requir	ed when reinstating)	DATE	D DIDEOTO	DO 111.40	┨┈
12.	S OFFICERS A		DELETE	13. 117	iži E	<del> </del>	ADDITIONS/CHANGES TO OFFIC	ERS AN	Change	Addition	નજી
NAME	FESTA, MIKE	•		1.2 N					Criango	Addition	CR2E037 (9/96)
STREET ADDRESS	7970 25 AVE. N.					ADDRESS					8
CITY-ST-ZIP	ST. PETERSBURG FL				ITY-S	i					띯
TITLE	Р		DELETE	21 T					Change	Addition	ඊ
NAME	WILLIAMS, JIM			22 N	AME						
STREET ADDRESS				235	TREET	ADDRESS			•		
CITY - \$1 - ZIP	TAMPA FL			2.40	CITY-S	ST-ZIP					]
TIPLE	D	l	DELETE	31T					Change	. Addition	
NAME	BOSICK, JOHN										
STREET ADDRESS	8744 58 WAY N. PINELLAS PARK FL					ADDRESS					
CHTY-ST-7IP TITLE	D PINELLAS PARK FL		DELETE	3.4. ( 4.1 T		ST-ZIP			Change	Addition	┨
NAME	EMMERT, JOHN	•			NAME				Glailing	ריים אינוטוו	
STREET ADDRESS	380 WINDWARD VILLA GRA	ND				ADDRESS					
CITY - \$1 - ZIP	ST. PETERSBURG FL					T-21P					
TITLE	7		DELETE	5.1 T					Change	☐ Addition	1
NAME	EICHER, RICHARD			5.2 N	AME				•		
STREET ADDRESS	9200 98TH AVE N					ADDRESS					
CITY - ST - ZIP	SEMINOLE, FL 00000			1		T-ZIP					
TITLE	D	Ī	DELETE	6.1 T		·····			☐ Change	Addition	1
NAME	RILEY, ALAN			6.2 N	AME						
STREET ADDRESS	7638 HARBOR VIEW WAY			6.3 S	TREET	address					
חוד גם עדום	SEMINOLE EL				(T)/ ^	7 7/0					1

14. I do 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 charged, or on an attachment with an address.