FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # 1. Corporation Name 700151

(4)

BOYS' CLUB OF PINELLAS PARK, INC.

			·					
	ace of Business	Mailing Address	Mailing Address				int dibil Albii \$46	44 01011 01011 01011 1081
SUITE 200 St. Peter:	STREET. NORTH SBURG FL 33709	5111 66TH STREET, NOR SUITE 200 ST. PETERSBURG FL 337						
U\$		US				3. Date Incorporated or Qualified 11/16/1959	3a. Date o	f Last Report 13/1995
21	l Place of Business	2a. Mailing Address 26				4. FEI Number 59-0910344		Applied For Not Applicable
22	pl. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	≥ \$	8.75 Additional Fee Required
City & St	28					Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip Country				8. This corporation has liability for intangible tax under s. 199.032,		
24	25 29 30 9. Name and Address of Current Registered Agent			Florida Statutes Yes No				
	9. Name and Address of Curre	it negistered Agent	- 81	Nan		10. Name and Address of New Re	gistered Age	nt
PERRI	NELSON		0.	IVan				
5111 66TH STREET, NORTH			82	Stre	eet Address (P.O. Box Number is Not Acceptable)			
SUITE 200			83					
SI. PE	TERSBURG FL 33709		84	City			6:	5 Zip Code
11 Pursuar	nt to the provisions of Sections 617,0502	2 and 617 1500 Florida Ptatutas	the character					1 '
UI TOGIS	itereu agent, or pour, in the State of Flori	iua. Such change was aumorized	by the corp	named poration	n's board c	on submits this statement for the purpo of directors. I hereby accept the appoin	ose of changin ntment as regis	ig its registered office stered agent, I am
iaiiiiiai	with, and accept the obligations of, Sect	tion 617.0503, Florida Statutes.					J	Ū
SIGNATURE	Signature typed or printed name of registered agent	t and title if applicable (NOTE	Registered Ago	n sionatu	ira renured wh	wer recreation	DATE	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		ECTORS IN 12
TITLE	CD	K) DELETE	1 1 TITLE		CD		□ Ct	··
NAME	LAMROUEX, RON		12 NAME			ert Carli	• •	- 1
STREET ADDRESS			1.3 STREET	ADDRES	- 1	4 29th Avenue, North	h	
CITY-ST-ZIP	PINELLAS PARK FL		1.4 City - S	T - ZIP	3	Petersburg, FL 337		
TITLE	VD POLICE			2.1 TITLE			ان نيا	ange 🔀 Addition
NAME	CHRISTIANS, RON		2.2 NAME		Wal	t Blanchard		
STREET ADDRESS			2 3 STREET ADDRESS 4		S 464	2 28th Avenue, North	n	
CHTY-ST-ZIP	PINELLAS PARK FL					Petersburg, FL 3371	13	
TITLE	OWEN, MARK	DELETE	3.1 TITLE				Ch	ange 🔲 Addition
NAME	ALGO TETU ALIE MODELL		3.2 NAME		İ			
STREET ADDRESS	LARGO FL		3 3 STREET		is			
TITLE		ch — — —		ST - Z IP				Fm. 4 162
NAME		MINTED HIDIE					Ch	ange 🔲 Addition
STREET ADDRESS	TO 40 TODD WAY MODELL		4. 2 NAME 4.3 STREET	ADDRESS	.			
CITY-ST-ZIP	PINELLAS PARK FL		4.3 STREET					
TITLE	D	DELETE	5 1 TITLE	1 'ZIF				ange
NAME	HELLAND, VERN		5 2 NAME					gv
STREET ADDRESS			53 STREET	ADDRESS	s			į
CITY-ST-ZIP	LARGO FL		5.4 CHY-S		-			
THILE	D	DELETE 61TH					Ch	ange 🔲 Addition
NAMé	PERRI, NELSON		6.2 NAME					
STREET ADDRESS	-		63 STREET	ADDRESS	s			
CITY-ST-ZIP	PINELLAS PARK FL		6 4 CHTY-S	T - Z IP	_[
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 coproration or the receiver or further empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 or planged or on an alternment with an altidress.								
SIGNATURE: (83)								