SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 16 AM 10:28

DOCUMENT # 703662 (7)

1. Corporation Name

SALES AND MARKETING EXECUTIVES OF TAMPA BAY, INC

Principal Place of Business	Mailing Address
4810 N. HOWARD AVE. STE 107 TAMPA FL 33603-1412	4810 N. HOWARD AVE. STE 107 TAMPA FL 33603-1412

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/13/1972
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-6153325 ☐ Applied For ☐ Not Applicable
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 5118 N. 56TH ST.	26 5118 N. 56TH ST.
22 Suite, Apt. #, etc. STE 123	27 Suite, Apt. #, etc. STE 123
23 City & State TAMPA, FL	28 City & State TAMPA, FL
24 Zip 33610-5408 25 Country USA	29 Zip 33610 5408 30 Country USA

9. Name and Address of Current Registered Agent

WEIL, JOHN
4810 N, HOWARD AVE
STE 107
TAMPA FL 33603

10. Name and Address of New Registered Agent

81 Name ~~JOHN~~ WEIL, JOHN
82 Street Address (P.O. Box Number is Not Acceptable) 5118 N. 56TH ST.
83 STE 123
84 City TAMPA FL 85 Zip Code 33610

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] 6/13/95
Signature, type 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	PD	11 TITLE	PRESIDENT/DIRECTOR PD	☒ Change ☐ Addition
NAME	MILLER, WILLIAM	12 NAME	BRASS, WAYNE	
STREET ADDRESS	1515 N WESTSHORE BLVD	13 STREET ADDRESS	P.O. BOX 110 MC FLT0793 N/A	
CITY-ST-ZIP	TAMPA FL	14 CITY-ST-ZIP	TAMPA, FL 33601	
TITLE	CBD	21 TITLE	CHAIRMAN/DIRECTOR CD	☒ Change ☐ Addition
NAME	FLAGG, DAVID C.	22 NAME	MILLER, WILLIAM	
STREET ADDRESS	1111 BAYSHORE BLVD C-10	23 STREET ADDRESS	1515 N. WESTSHORE BLVD	
CITY-ST-ZIP	CLEARWATER FL	24 CITY-ST-ZIP	TAMPA, FL 33607	
TITLE	STD	31 TITLE	STD	☒ Change ☐ Addition
NAME	BEIER, EUGENE M	32 NAME	UNDERWOOD, LARRY	
STREET ADDRESS	3183 LANDMARK DR #624	33 STREET ADDRESS	101 E KENNEDY, STE 1170	
CITY-ST-ZIP	CLW FL	34 CITY-ST-ZIP	TAMPA, FL 33602	
TITLE	PD	41 TITLE	VD	☒ Change ☐ Addition
NAME	HIMES, DONALD	42 NAME	HOFFER, THOMAS	
STREET ADDRESS	2772 WILDWOOD DRIVE	43 STREET ADDRESS	1515 N. WESTSHORE	
CITY-ST-ZIP	CLEARWATER FL	44 CITY-ST-ZIP	TAMPA, FL 33607	
TITLE		51 TITLE	P(ELECT)D	☒ Change ☐ Addition
NAME		52 NAME	RYAN, ARTHUR	
STREET ADDRESS		53 STREET ADDRESS	6420 E BAYSHORE	
CITY-ST-ZIP		54 CITY-ST-ZIP	TAMPA, FL 33611	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E037 (3/95)

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)(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, added or deleted with an address.

SIGNATURE: [signature] ARTHUR RYAN 6/13/95 813 839-2310
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0018700