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Apr 29 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **705460** (4)

1. Corporation Name

**AMERICAN HEART ASSOCIATION, FLORIDA AFFILIATE, INCORPORATED**

Principal Place of Business

Mailing Address

**9900 NINTH ST N  
ST PETERSBURG FL 33716-601  
US**

**9900 NINTH ST NORTH  
ST PETERSBURG FL 33716-601  
US**

2. Principal Place of Business

**21 9900 Ninth St North**

Suite, Apt. #, etc.

**22**

City & State

**23 St. Petersburg, FL**

Zip

**24 33716**

Country

**25 USA**

2a. Mailing Address

**26 99 00 Ninth St North**

Suite, Apt. #, etc.

**27**

City & State

**28 St. Petersburg**

Zip

**29 33716**

Country

**30 USA**

3. Date Incorporated or Qualified

**08/28/1959**

4. FEI Number

**59-0637852**

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. 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

**BRENNAN, JOHN J.  
1213 16TH ST. N.  
ST. PETERSBURG FL 33705**

10. Name and Address of New Registered Agent

81 Name

**John J. Brennan**

82 Street Address (P.O. Box Number is Not Acceptable)

**9900 Ninth Street**

83

84 City

**St. Petersburg**

**FL**

85 Zip Code

**33716**

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 **John J. Brennan, Executive Vice President**

**April 21, 1998**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DCD**  
STREET ADDRESS **GOLDGERG, STEPHEN R**  
CITY-ST-ZIP **6731 15TH AVENUE NORTH  
ST. PETERSBURG FL 33710**

TITLE ☐ DELETE

NAME **DV**  
STREET ADDRESS **SITES, JOHN D**  
CITY-ST-ZIP **131 MAGNOLIA AVE SE  
FT WALTON BEACH FL**

TITLE ☐ DELETE

NAME **DVD**  
STREET ADDRESS **TALLEY, DAVID H**  
CITY-ST-ZIP **1983 PGA BLVD. SUITE 104  
PALM BEACH GARDENS FL 33408**

TITLE ☐ DELETE

NAME **DPP**  
STREET ADDRESS **SEALS, ALLEN A**  
CITY-ST-ZIP **3948 SOUTH 3RD ST  
JACKSONVILLE FL**

TITLE ☐ DELETE

NAME **DV**  
STREET ADDRESS **NAMEY, JOSEPH JR. DO**  
CITY-ST-ZIP **13644 WALSHINGHAM ROAD  
LARGO FL 34644**

TITLE ☐ DELETE

NAME **T**  
STREET ADDRESS **SASLAW, GARY R**  
CITY-ST-ZIP **20801 BISCAYNE BLVD. SUITE 304  
AVENTURA FL 33180**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **D**  
1.3 STREET ADDRESS **Talley, David H.**  
1.4 CITY-ST-ZIP **1983 PGA Blvd. Suite 104  
Palm Beach Gardens, FL 33408-3001**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **DC**  
2.3 STREET ADDRESS **Gary R. Saslaw, Esq.**  
2.4 CITY-ST-ZIP **20801 Biscayne Blvd. Suite 304  
Miami, FL 33180**

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME **DP**  
3.3 STREET ADDRESS **Maurice S. Holder, Ph.D.**  
3.4 CITY-ST-ZIP **Florida A&M University Room 021-L  
Tallahassee, FL 32307**

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME **D**  
4.3 STREET ADDRESS **Joseph J. Namey, Jr., DO**  
4.4 CITY-ST-ZIP **Suncoast Internal Medicine  
13644 Walsingham Road Largo, FL 33774**

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME **DV**  
5.3 STREET ADDRESS **William Colledge**  
5.4 CITY-ST-ZIP **Capital City Bank 217 N. Monroe Street  
Tallahassee, FL 32301**

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME **T**  
6.3 STREET ADDRESS **James Dixon, Jr., CPA**  
6.4 CITY-ST-ZIP **12800 University Drive Suite 260  
FL Myers, FL 33907**

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: **Joseph J. Namey, Jr., D.O. President**

**April 10, 1998**

CR2E037 (10/97)