## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

1997
DOCUMENT #

713803

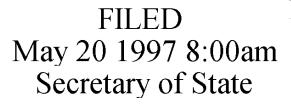
(5)

## BIG BROTHERS/ BIG SISTERS OF PINELLAS COUNTY, INC

Principal Place of B	usiness
147 BELCHER RD., S	TE. 4

Mailing Address

147 BELCHER RD., STE. 4 - LARGO FL 33771





										12/14/1967 06/02/1996		
2.	Principal Pl	ace of Busi	ness	28.	Mailing Address					4. FEI Number Applied For		
21				26						59-1197491 Not Applicable		
	Suite, Apt.	#, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional		
22				27						5. Continuate of classes besided At A Fee Required		
<u></u>	City & State	)		-	City & State					6. Election Campaign Financing \$5.00 May Be		
23	7		Country	28	7:-			<del></del>	<del></del>	Trust Fund Contribution Added to Fees		
	Zip		Country	Ь	Zip	<b></b>	ountry			8. This corporation has liability for intangible tax under s. 199.032,		
24		0 Name	25 and Address of Curren	29	tered Agent	30	Τ.		Florida Statutes Yes YNo 10. Name and Address of New Registered Agent			
9. Name and Address of Current Registered Agent						81 Name						
ESSLINGER, THOMAS H.												
		CHER RD					62 Street Address (P.O. Box Number is Not Acceptable)					
		FL 34641	OIL 4				83	$\vdash$				
	Dalloo	L OTOTI					_					
							84	Cit	<i>!</i>	FL 85 Zip Code		
_ 11	I. Pursuant I	o the provis	ions of Sections 617.050	2 and 6	17.1508, Florida Statu	ites, the	abov	e-nar	ned corpo	F 1111		
Ĺ	office or re agent. Las	egistered ag n familiar w	gent, or both, in the State ith, and accept the oblina	of Florid ations of	da. Such change was '. Section 617.0503. F	authoriz Iorida St	ed by	the.	corporatio	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered		
l	GNATURE _		, =		,			•				
( SI	GNATORE _	Signature typed	or printed name of registered age	nl and title	if applicable. (NO	TE: Registe	red Age	nt sigr	ature required	d when reinstaling) DATE		
12	2.		OFFICERS AN	D DIREC		13				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TIT	TLE	VD			KOELETE		TITLE		V h	ce Pres K Change W Addition rubaker, Clayton		
1	ME		, ROBERT			- I	NAME			· · · · · · · · · · · · · · · · · · ·		
ST	REET ADDRESS		NBROOKE DR				STREET			erox Corp. 33607		
	TY-ST-ZIP		/ HARBOR FL				CITY-S	T-ZIP	4	2 W. Cypress St. #100 Tampa,FL		
ŀ	TLE	TD			☐ DELETE	1	TITLE		V1	ce Pres ☐ Change [X] Addition		
	IME		EL, ERIC			1	NAME		Gr	ay, Pamela		
STREET ADDRESS 600 CLEVELAND STREET CITY-ST-ZIP CLEARWATER FL 34615				235				1state 780 Carillon Pkwy.#400				
	TY-ST-ZIP TLE	PD	MAIER FL 34013		DELETE	*****	CITY-:	ST-ZIP	- St	. Petersburg, FL 33716 Change Y Addition		
			NT, DIANE M.		L Deteil		NAME			cretary		
	ME		NI, DIANE M. · 60TH STREET N.				NAME STREET	ADDA	18.9	lder, Keith		
	REET ADDRESS IY-ST- <i>z</i> ip		WATER FL				STHEET CITY-:			O. Box 6865 Clearwater, FL 34618		
-	LE	SD	IINIEN IE		☐ DELETE		TITLE	01-ZIP		Change Addition		
	.ME	MEYER	. LYNN		<del></del> <del>-</del>		NAME		V10	ce President XXI Charge LI Addition		
1	REET ADDRESS		AST BAY DRIVE			8	STREET		ss			
	TY-ST-ZIP		WATER FL 34624				CITY-S					
	LE	PD			DELETE		TITLE	***		☐ Change ☐ Addition		
NA	IME		LANGFRED			5.2	NAME					
ST	REET ADDRESS		U.S. HIGHWAY 19N #	203		5.3	STREET	ADDR	ss			
cn	TY-ST-ZIP		WATER FL			5.4	CITY-S	T-ZIP				
TIT	ILE .	D			DELETE	6.1	TITLE			☐ Change ☐ Addition		
NA.	IME		GER, THOMAS H.			6.2	NAME					
ST	reet address		LCHER RD STE 4			6.3	STREET	ADDR	ss			
	TY-ST-ZIP	LARGO					CITY-S					
14	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											

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