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Jan 24 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 716979 (0)

1. Corporation Name

SUNCOAST ARCHAEOLOGICAL & PALEONTOLOGICAL SOCIETY, INC.

Principal Place of Business

Mailing Address

1529 30TH AVENUE N.  
ST PETERSBURG FL 33704

1529 30TH AVENUE N.  
ST PETERSBURG FL 33704-1836



3. Date Incorporated or Qualified  
08/11/1969

3a. Date of Last Report  
01/24/1996

2. Principal Place of Business

2a. Mailing Address

21 3901-12th ST NE  
Suite, Apt. #, etc.

26 ← same  
Suite, Apt. #, etc.

4. FEI Number  
23-7067210

Applied For  
Not Applicable

22

27

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

23 ST. PETERSBURG FL

28

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip Country

Zip Country

24 33703 25 PINELLAS

29 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBINSON, RAYMOND C  
3901 12TH STREET NE  
ST PETERSBURG FL 33703

81 Name

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

83

84 City

FL

85 Zip Code

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, typed 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 VD ☐ DELETE  
NAME BALDWIN, LEWIS  
STREET ADDRESS 317 TERRACE DR E  
CITY-ST-ZIP CLEARWATER FL

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME D LEWIS BALDWIN  
1.3 STREET ADDRESS 317 Terrace Dr East  
1.4 CITY-ST-ZIP Clearwater FL

TITLE ST ☐ DELETE  
NAME KNIGHT, ANITA  
STREET ADDRESS 3016-23RD STREET, N.  
CITY-ST-ZIP ST. PETERSBURG FL

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME S ANITA KNIGHT  
2.3 STREET ADDRESS 3016-23rd ST. N.  
2.4 CITY-ST-ZIP ST. PETERSBURG FL

TITLE VD ☐ DELETE  
NAME MARSHALL, VIVIAN  
STREET ADDRESS 10008 HIGHWAY 64 E  
CITY-ST-ZIP BRADENTON FL

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE PD ☐ DELETE  
NAME ROBINSON, RAYMOND C  
STREET ADDRESS 3901 12TH STREET, NE  
CITY-ST-ZIP ST PETERSBURG FL

4.1 TITLE ☒ Change ☒ Addition  
4.2 NAME PD RAYMOND C ROBINSON  
4.3 STREET ADDRESS 3901-12th ST NE  
4.4 CITY-ST-ZIP ST PETERSBURG FL

TITLE D ☐ DELETE  
NAME LEWIS, SUE  
STREET ADDRESS 5226 23RD AVE S.  
CITY-ST-ZIP GULFPORT FL

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME KROMBACH, CAROLINE  
STREET ADDRESS 1509 54TH ST. N.  
CITY-ST-ZIP ST. PETERSBURG FL

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME PD CAROLINE KROMBACH  
6.3 STREET ADDRESS 1509 54th ST N.  
6.4 CITY-ST-ZIP ST PETERSBURG FL

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 changed or on an attachment with a signature.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0080041

CR2E037 (9/96)