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NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **719453** **(3)**

1. Corporation Name
FLORIDA SUNCOAST CHAPTER OF THE 99'S, INC.

Principal Place of Business	Mailing Address
307 BRIGHTWATERS BLVD ST PETERSBURG FL 33704 US	307 BRIGHTWATERS BLVD ST PETERSBURG FL 33704 US

3. Date Incorporated or Qualified: 10/06/1970

4. FEI Number: 59-1594346 ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 2290 Terrace Dr. N.	26 2290 Terrace Dr. N.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Clearwater, FL	28 City & State: Clearwater, FL
24 Zip: 33765 25 Country: USA	29 Zip: 33765 30 Country: USA

9. Name and Address of Current Registered Agent

BRYANT, MARY S.
307 BRIGHTWATERS BLVD
ST PETERSBURG FL 33704

10. Name and Address of New Registered Agent

81 Name: Marie E. Grein
82 Street Address (P.O. Box Number is Not Acceptable): 2290 Terrace Dr. N.
83
84 City: Clearwater FL 85 Zip Code: 33765

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: Marie E. Grein Treasurer Feb. 24, 1998
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SZYDKOWSKI, CHARLENE A. 1507 STRADA D'ORO VENICE FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	SD Susan Berger 6601 35th Ave. West Bradenton, FL 34209	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD BANSEMER, DENISEL 15 N METEORDE CLEARWATER FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BRYANT, MARY S. 307 BRIGHTWATERS BLVD ST PETERSBURG FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	TD Marie E. Grein 2290 Terrace Dr. N. Clearwater, FL 33765	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD WATKINS, AILEEN M. PO BOX 1028 ST PETERSBURG FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	VCD Jeanette Burkland 250 Harborside Dr. Safety Harbor, FL 34695	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/97)

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: Marie E. Grein Marie E. Grein-Treasurer Feb. 24, 1998 813-799-1552
Date Daytime Phone & extension