FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 721041 (2)						
TAMPA	HISTORICAL SOCIETY, IN	C.				
		-				
Principal Plac	e of Business	Mailing Address				
245 S. HYDE PARK AVENUE TAMPA FL 33606		245 S. HYDE PARK AVENUE			3. Date Incorporated or Qualified	
		TAMPA FL 33606			_05/26/1971	
					4. FEI Number Applied Fo)r
2. Principal Place of Business		2a. Mailing Address			59-1652496 Not Applic	
21		26 Walning Address			5. Certificate of Status Desired	r)
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Election Campaign Financing \$5.00 May Be	\neg
City & State		City & State			Trust Fund Contribution	
City & State		28			7. Is this nonprofit corporation a homeowners association?	
Zip Country		Zip Country		intry	8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Currer	nt Registered Agent		81 Name	10. Name and Address of New Registered Agent	
SIRRII ARN	DESCRIPTION OF S		i		FRANK R. NORTH President	
VANLANDINGHAM, KYLE S 11208 WINN RD					PRANK R NORTH President dress (P.O. Box Number is Not Acceptable)	
	MNN KD EW FL 33569			83	1809 W INMAN AVE	\dashv
HITCHIN	LW FL 33308			04 00	leel Turout	
				84 City	TAMPA FLORIDA FL 33 606	
11. Pursuant to the provisions of Sections 617.0502 and 617.1505, Florida Statutes, the above-named office or registered agent, or both, in the State of Florida. Such change was authorized by the corragent. I am familiar with, and accept the goldgottons of, Section 617.0503, Florida Statutes.					progration submits this statement for the purpose of changing its register	red
onice or r	registered agent, or both, in the state im familiar with, and accept the oblig	i of Florida. Such change was htions of, Sertion 617.0503, F	authorize Iorida Stat	a by the corpor lutes.	ration's board of directors. I hereby accept the appointment as registere	80
SIGNATURE	37/10 kg/1	1.1	24 F	- FB.19	198 Frank R. North	
12.		· · · · · · · · · · · · · · · · · · ·	TE: Registere	d Agent signature req	auried when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OFFICERS AND DIRECTORS D DELETE		1.1 10	TI F	Change Adv	dition
NAME	PLATT, JAN		1.2 NAME			1
STREET ADDRESS	3531 VILLAGE WAY			TREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33629		1.4 CITY-ST-ZIP			
TITLE	Р	▼ DELETE	2.1 TJ		☐ Change ☐ Add	fition
NAME	VANLANDINGHAM, KYLE		2.2 N	AME		1
STREET ADDRESS	11208 WINN RD		2.3 S	REET ADDRESS	•	- 1
CITY-ST-ZIP	RIVERVIEW FL		2.40	ITY-ST-ZIP		
TITLE	V DEALES DALES (A)	DELETE	3.1 T(☐ Change ☐ Ado	lition
NAME	BEAVER, RALPH N		3.2 N/	···		- 1
STREET ADDRESS	3935 EDEN ROCK CIR TAMPA FL 33634			IREET ADDRESS		ŀ
CITY-ST-Z#P TITLE	TD	☐ DELETE	3.4. C	TLE	☐ Change ☐ Ado	dition
NAME	LATIMER, LOIS		4. 2 N			
STREET ADDRESS	3924 SAN JUAN		1	TREET ADDRESS		1
CITY-ST-ZIP_	TAMPA FL			TY-ST-ZIP		
TITLE	D	DELETE	5.1 Ti	TLE	☐ Change ☐ Add	lition
NAME	CAMP, PAUL E		5.2 N	AME		
STREET ADDRESS	5019 WHITEWAY DR		5.3 S1	treet address		ļ
CITY-ST-ZIP	TAMPA FL 33617	T1 65:555		TY-ST-ZIP		-14t
TITLE	D DOWN LINE	DELETE	6.1 TI		Change Add)ICION
NAME	DOVI, LULA 3316 LACEWOOD RD		62 N			
				REET ADDRESS		- [
CITY-ST-2IP	TAMPA FL 33618		■ 5.4 CI	TY-ST-ZIP		

14. Thereby certify that the information supplied with this filling 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 empoyered 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.

Fram1 R Morth , President

SIGNATURE:

FILED

Mar 03 1998 8:00am

Secretary of State