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Mar 19 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 # 721563 (5)

1. Corporation Name

BAY VISTA ELEMENTARY PARENT-TEACHER ASSOCIATION,
ST PETERSBURG, INC.



Principal Place of Business

Mailing Address

TEACHER ASSOCIATION ST PETERSBURG INC
5900-9TH STREET SO
ST PETERSBURG FL 33705

TEACHER ASSOCIATION ST PETERSBURG INC
5900-9TH STREET SO
ST PETERSBURG FL 33705-5502

3. Date Incorporated or Qualified
08/23/1971

3a. Date of Last Report
03/15/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
59-1731485

☒ 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

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

UNDERBERG, ALFRED E
11-42ND STREET, N.
ST PETERSBURG FL 33713

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 PD ☒ DELETE
NAME ;O;AVPOS. BERNARD
STREET ADDRESS 1340 PINELLAS POINT DRIVE SOUTH
CITY- ST- ZIP ST PETERSBURG FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

TITLE DC ☐ DELETE
NAME KING, DEBBIE
STREET ADDRESS 5585 11TH ST SO
CITY- ST- ZIP ST. PETERSBURG FL

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE TD ☐ DELETE
NAME STRATTON, DENECE
STREET ADDRESS 6830 COLONY DR SO
CITY- ST- ZIP ST PETERSBURG FL 33705

3.1 TITLE ☒ Change ☒ Addition
3.2 NAME DC
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP 33705

TITLE SD ☐ DELETE
NAME PLATTER, SHARON
STREET ADDRESS 236 COLONY POINT ROAD SOUTH
CITY- ST- ZIP ST. PETERSBURG FL 33705

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP 33705

TITLE C ☐ DELETE
NAME DENNISTON, JR. C
STREET ADDRESS 1600 61 AVENUE SOUTH
CITY- ST- ZIP ST PETERSBURG FL 33712

5.1 TITLE ☒ Change ☒ Addition
5.2 NAME PD
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP 33712

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME TDC
6.3 STREET ADDRESS ALDRICH, CONNIE
6.4 CITY- ST- ZIP 1722- 62 PLACE S,
ST. PETERSBURG, FL 33712

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 an address.

SIGNATURE: Charles F. Denniston 3/13/97 893-2335
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0050143

CR2E037 (9/96)