


FILE NOW: FILING FEE IS \$61.25

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Feb 10 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 732902 (2)  
1. Corporation Name  
THE TAMPA BAY ESTATE PLANNING COUNCIL, INC.



Principal Place of Business Mailing Address  
P O BOX 17855 TAMPA FL 33682 P O BOX 17855 TAMPA FL 33682

3. Date Incorporated or Qualified  
06/02/1975  
4. FEI Number  
51-0173888  
Applied For  
Not Applicable

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Country 29 Zip 30 Country

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

9. Name and Address of Current Registered Agent  
SMITH, BYRON C  
401 E JACKSON ST  
SUITE 3400  
TAMPA FL 33602

10. Name and Address of New Registered Agent  
81 Name  
KATHLEEN J. BELMONTE  
82 Street Address (P.O. Box Number is Not Acceptable)  
101 E. KENNEDY BLVD.  
83 4th floor  
84 City TAMPA FL 85 Zip Code 33602

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 *Kathleen Belmonte* DATE 1-15-98  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS |  |
|----------------------------|--|
| TITLE                      | P <input checked="" type="checkbox"/> DELETE |
| NAME                       | TOLLE, DIRK V                                |
| STREET ADDRESS             | 315 E MADISON ST                             |
| CITY-ST-ZIP                | TAMPA FL                                     |
| TITLE                      | V <input type="checkbox"/> DELETE            |
| NAME                       | OWENS, V. JEAN                               |
| STREET ADDRESS             | 765 CORTARO DRIVE                            |
| CITY-ST-ZIP                | SUN CITY CENTER FL                           |
| TITLE                      | T <input type="checkbox"/> DELETE            |
| NAME                       | SMITH, BYRON C                               |
| STREET ADDRESS             | 401 E JACKSON ST #3400                       |
| CITY-ST-ZIP                | TAMPA FL                                     |
| TITLE                      | V <input type="checkbox"/> DELETE            |
| NAME                       | RAMENDA, JOSEPH T                            |
| STREET ADDRESS             | 2502 ROCKY POINT DR #310                     |
| CITY-ST-ZIP                | TAMPA FL                                     |
| TITLE                      | D <input type="checkbox"/> DELETE            |
| NAME                       | LASDAY, RONALD W                             |
| STREET ADDRESS             | 3030 N ROCKY POINT DR #500                   |
| CITY-ST-ZIP                | TAMPA FL                                     |
| TITLE                      | D <input checked="" type="checkbox"/> DELETE |
| NAME                       | VOGEL, MICHELE                               |
| STREET ADDRESS             | 100 SECOND AVENUE SOUTH                      |
| CITY-ST-ZIP                | ST. PETERSBURG FL                            |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|---|--|
| 1.1 TITLE   | T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME  | KATHLEEN J. BELMONTE   |
| 1.3 STREET ADDRESS                                    | 101 E. KENNEDY BLVD.   |
| 1.4 CITY-ST-ZIP                                       | TAMPA FL 33602   |
| 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition              |
| 2.2 NAME  |  |
| 2.3 STREET ADDRESS                                    |  |
| 2.4 CITY-ST-ZIP                                       |  |
| 3.1 TITLE   | V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME  |  |
| 3.3 STREET ADDRESS                                    |  |
| 3.4 CITY-ST-ZIP                                       |  |
| 4.1 TITLE   | P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME  |  |
| 4.3 STREET ADDRESS                                    |  |
| 4.4 CITY-ST-ZIP                                       |  |
| 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition              |
| 5.2 NAME  |  |
| 5.3 STREET ADDRESS                                    |  |
| 5.4 CITY-ST-ZIP                                       |  |
| 6.1 TITLE   | S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME  | LINDA A. FRIES   |
| 6.3 STREET ADDRESS                                    | 4930 W. KENNEDY BLVD. #800   |
| 6.4 CITY-ST-ZIP                                       | TAMPA FL 33609   |

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: *Kathleen Belmonte* DATE: 1-15-98

CFR2E037 (10/97)

**TAMPA BAY ESTATE PLANNING COUNCIL**

**ADDITIONAL LISTING FOR 1998 NONPROFIT CORPORATION ANNUAL REPORT**

**D**  
**JOHN P. BAUMANN, JR.**  
**11210 N. DALE MABRY**  
**TAMPA, FL 33618**

**D**  
**BETSY D. CRAIG**  
**401 E. JACKSON STREET**  
**TAMPA, FL**

**D**  
**ROBERT J. DRABIK**  
**8302 KIRKWOOD DRIVE**  
**TAMPA, FL 33634**

**D**  
**LEE M. JOEB**  
**509 HYDE PARK AVENUE**  
**TAMPA, FL**

**D**  
**EUGENE M. LefLOCH**  
**400 N. TAMPA STREET #2626**  
**TAMPA, FL 33602**

**D**  
**JOAN B. McLAUGHLIN**  
**400 N. ASHLEY DRIVE**  
**TAMPA, FL 33602**

**D**  
**BRIAN C. SPARKS**  
**400 N. ASHLEY DRIVE**  
**TAMPA, FL**