

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

195 MAR -3 AM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 734390 (8)

1. Corporation Name

ST. PETERSBURG INTERNATIONAL FOLK FAIR SOCIETY, INC.

Principal Place of Business

Mailing Address

2201 FIRST AVENUE NORTH
ST PETERSBURG FL 33713

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ST PETERSBURG FL 33713

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/20/1975

3a. Date of Last Report
04/07/1994

4. FEI Number
59-1674088

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HASKEL, LOUIS
2963 GULF TO BAY BLVD
S210
CLEARWATER FL 34619

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the fee applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	OVALLE, RALPH
STREET ADDRESS	13088 110 AVE N
CITY - ST - ZIP	LARGO FL
TITLE	D
NAME	SORIANO, CARLOS
STREET ADDRESS	8020 BAYWOOD PARK DR
CITY - ST - ZIP	SEMINOLE FL
TITLE	S
NAME	DOWLING, JO
STREET ADDRESS	5729 - 13 AVE NO
CITY - ST - ZIP	ST PETERSBURG, FL 0
TITLE	T
NAME	JANOYAN, ARDIE
STREET ADDRESS	885 VICTOR HERBERT DR
CITY - ST - ZIP	LARGO, FL 0
TITLE	P
NAME	DOBBS, ROBERT
STREET ADDRESS	7744 BRISTOL CRT
CITY - ST - ZIP	ST PETERSBURG FL
TITLE	V
NAME	CHIPELO, HENRY
STREET ADDRESS	2849 57TH ST N
CITY - ST - ZIP	ST PETERSBURG FL

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	Edith Clayton
1.4 CITY - ST - ZIP	155 84th Avenue North
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	St. Petersburg, FL 33702
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	Gerry Richter
4.3 STREET ADDRESS	9670 44th Way North
4.4 CITY - ST - ZIP	Pinellas Park, FL 34666
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 owner 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:

Robert J. Dobbs, Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/95 SB 345-2418
Date (month/year) Time (hour)