FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # 735599**

1. Corporation Name

THE CATHEDRAL BOOKSTORE OF ST. PETERS CATHEDRAL, INC.

Principal Place of Business 140-4TH ST N ST PETERSBURG FL 33701

Mailing Address

136 4TH STREET NORTH ST PETERSBURG FL 33701

FILED Apr 21, 1999 8:00 am Secretary of State

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							1							
2. Principal Pl	ace of Business	2a.	2a. Mailing Address				3. Date Incorporated or Qualifed 04/16/1976							
Suite, Apt.	# etc	1201	Suite, Apt. #, etc.				4. FE	El Number				Applied For		
22 - ~		27					5	9-1708310		_	11	Not Applicable		
City & State	9	12.1	City & State	<u>-</u> -								Additional		
23		28	- 7				5. Ce	ertifcate of Statu	is Desired			Required		
Zip	Country	1	Zip	Cour	ntry		6. E)	ection Campaig	n Financing		\$5.0	0 May Be		
24	25	29	3	0			i -	rust Fund Contri	_			d to Fees		
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent							
						Name								
CYNTHIA C. CAMPBELL						82 Street Address (D.O. Roy Number in Not Assentable)								
136 4TH STREET NORTH					82 Street Address (P.O. Box Number is Not Acceptable)									
ST. PETERSBURG FL 33701					83									
SI. PEIER	SOUNG FL SO/UI							<u> </u>						
	19. P. C.				84	City				FL	85 Zi	Code		
11 Pursuant	to the provisions of Sections 617 0502	and 6	17 1508 Florida Statutes	the ab	OVE	-named co	progration su	ubmits this state	ment for the	purpose of	changing	its registered		
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.														
agent. I a				ia Statu	iles.									
SIGNATURE	Stynthia C. Campbell Stynature, typed or printed name of registered agent	<u> </u>	Manager WOTER	acidarad .	Agen	t elemeture recu	uired when reins	tation)		DATE				
12.	OFFICERS AND			13.	-yan	t anglitation o requ		DITIONS/CHAN	GES TO OF		D DIREC	TORS IN 12		
TITLE	D	Direc	DELETE	1,1 TITI	LE		SECRE	TARY			Chang	e 🔲 Addition		
NAME	TUCKER, JEANNE S			1.2 NA	ME	l:	TEANN	1E 'S.T	ucher			,		
STREET ADDRESS	1050 RAFAEL BLVD NE			1		ADDRESS /	0.50 K	PAFAEL	Blvd.	NE				
ī	ST PETERSBURG FL 33704			1.4 CIT				tersbur		33700	4			
CITY-ST-ZIP	D		☐ DELETE	2.1 TITI	_		TREAS		} ,		Chang	e Addition		
	BECK, CHARLES E			2.2 NAJ				-	Delan	≠				
NAME	•					APPRECO	JCANE	HE C.	LE DKOO	DR. SI	=			
STREET ADDRESS	1656 MANOR WAY SOUTH					ADDRESS	7706 200	COQUINA	1	337	45			
CITY-ST-ZIP -	ST. PETERSBURG FL		☐ DELETE	2.4 CF		T-ZIP	<u> 27.7C</u>	ters bur	9.15-6	3.5:/	☐ Chang	e Addition		
TITLE	D KAREN		C) DELETE	•		•	υ Μασίε.	- 7 /is	م ليلا					
NAME	AMUNDRUD, KAREN			3.2 NA			י אלבטליי	a R. Lit 25th Av	Z N					
STREET ADDRESS	4663 32ND AVE N					ADDRESS				3 37	Ind			
CITY-ST-ZIP	ST. PETERSBURG FL 33713		■ DELETE	3.4. CIT		T- ZIP		Eters bu	Rg, rc	. <u> </u>	□ Chang	e Addition		
TITLE	D TENDY		W DELETE	4.1 7111		1	\mathcal{D}_{i}	.4 - 0	. رامنی ما			Addiosit		
NAME	JOHNSON, TERRY			4. 2 NA			RAYMO	Nd R-C JASMINI	AMPO	126				
STREET ADDRESS	6262 93RD TERR N, #3902					ADDRESS	51,045	JASMI, NI	e circ	E 15	714			
CITY-ST-ZIP	PINELLAS PARK FL 33782		[] Actor	4.4 CIT		r-ziP	<u>57. /2</u>	TERS bu	Rg) F (<u> 33</u>	Chang	e		
TITLE	P		☐ DELETE	5.1 TIT		1			•		☐ chang	e LI Madinou		
NAME	WEGNER, VANCE L			5.2 NA						•				
STREET ADDRESS	200 13TH AVE NO			_		ADDRESS								
CITY-ST-ZIP	ST PETERSBURG FL			5.4 CIT		-ZIP					- C) () t			
TITLE	D		DELETE	6.1 7377		ľ					Chang	e		
NAME	JOHNSON, MICHAEL			6.2 NA	_									
STREET ADDRESS	7000:131 STREET NO			6.3 ST	REET	ADDRESS								
CITY-ST-ZIP	SEMINOLE FL			6.4 CIT	Y-51	-ZIP								

Thereby 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 an attachment with an address, with all other like empowered.

SIGNATURE: \[\]