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Feb 28 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

MAIL NAME: T
CORP - MA
ZQ

DOCUMENT # 736149 (6)

1. Corporation Name

TAMPA BAY CENTER MERCHANTS ASSOCIATION, INC.

Principal Place of Business

3302 W. DR. MARTIN LUTHER KING JR. BLVD.
TAMPA FL 33607

Mailing Address

3302 W. DR. MARTIN LUTHER KING JR. BLVD.
TAMPA FL 33607

3. Date Incorporated or Qualified
06/18/1976

3a. Date of Last Report
08/20/1996

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number
59-1725645

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

HOUCK, SUSAN
3302 W. DR. MARTIN LUTHER KING BLVD.
TAMPA FL 33607

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
NAME KRATT, CHARLEAN
STREET ADDRESS 3302 W DR MARTIN LUTHER KING JR BLVD
CITY - ST - ZIP TAMPA FL

1.1 TITLE PD
1.2 NAME Terri Milano
1.3 STREET ADDRESS 3302 W. Dr. MLK Jr. Blvd.
1.4 CITY - ST - ZIP Tampa, FL

TITLE VD
NAME JOHNSON, ERIN
STREET ADDRESS 3302 W. DR. MARTIN LUTHER KING BLVD.
CITY - ST - ZIP TAMPA FL

2.1 TITLE VD
2.2 NAME Nancy Wanucha
2.3 STREET ADDRESS 3302 W. Dr. MLK Jr. Blvd.
2.4 CITY - ST - ZIP Tampa, FL

TITLE D
NAME CRERAND, CHARLES
STREET ADDRESS 3302 W. DR. MARTIN LUTHER KING BLVD.
CITY - ST - ZIP TAMPA FL

3.1 TITLE T/S/D
3.2 NAME Charles Crerand
3.3 STREET ADDRESS 3302 W. Dr. MLK Jr. Blvd.
3.4 CITY - ST - ZIP Tampa, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/97

(813) 879-6070

Date

Daytime Phone # 0070175

CR2E037 (9/96)