SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

2nd 1997

FILED
Aug 20 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 # 738301 (1)

1. Corporation Name
TAMPA CROSSROADS, INC.

Principal Place of Business	Mailing Address
5120 N. NEBRASKA AVENUE TAMPA FL 33603	5120 N. NEBRASKA AVENUE TAMPA FL 33603

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/08/1977
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 59-1743719 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HANLON, JAMES
101 E. KENNEDY BLVD,
SUITE 1500
TAMPA FL 33602

10. Name and Address of New Registered Agent

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 James N. Hanlon TREASURER 7/24/97
Signature, type or print 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	CEO	☐ DELETE	1.1 TITLE	CHAIR/D	☒ Change ☐ Addition
NAME	PARKHILL, HELEN		1.2 NAME	HELEN PARKHILL	
STREET ADDRESS	703 W. BAY ST.		1.3 STREET ADDRESS	300 S. HYDE PARK AVE, SUITE 150	
CITY-ST-ZIP	TAMPA FL 33606		1.4 CITY-ST-ZIP	TAMPA FL 33606	
TITLE	D	☒ DELETE	2.1 TITLE	CHAIR-ELECT/D	☐ Change ☒ Addition
NAME	EDGE, LINDA		2.2 NAME	ARNDREETA HARRIS	
STREET ADDRESS	4808 LONGFELLOW AVE		2.3 STREET ADDRESS	10740 N. 56TH ST	
CITY-ST-ZIP	TAMPA, FL 00000		2.4 CITY-ST-ZIP	TAMPA FL 33617	
TITLE	IPC	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	JORDAN, PAM		3.2 NAME	600002274265	
STREET ADDRESS	777 S HARBOR ISL BLVD STE 780		3.3 STREET ADDRESS	-08/22/97--01004--007	
CITY-ST-ZIP	TAMPA, FL 00000		3.4 CITY-ST-ZIP	***61.25	
TITLE	C	☐ DELETE	4.1 TITLE	IMMEDIATE PAST CHAIR/D	☒ Change ☐ Addition
NAME	KANE, MARK		4.2 NAME	MARK KANE	
STREET ADDRESS	702 N FRANKLIN ST		4.3 STREET ADDRESS	702 N. FRANKLIN ST	
CITY-ST-ZIP	TAMPA FL		4.4 CITY-ST-ZIP	TAMPA FL 33601	
TITLE	PCEO	☐ DELETE	5.1 TITLE	PCEO	☐ Change ☐ Addition
NAME	PLANT, PETER		5.2 NAME	PETER PLANT	
STREET ADDRESS	6 FORESTALL ROAD		5.3 STREET ADDRESS	6 FORESTALL ROAD	
CITY-ST-ZIP	TAMPA FL		5.4 CITY-ST-ZIP	TAMPA FL	
TITLE	SD	☒ DELETE	6.1 TITLE	SECRETARY/D	☐ Change ☒ Addition
NAME	GUY, IRENE		6.2 NAME	BARBARA STECK	
STREET ADDRESS	720 S. BREVARD AVENUE		6.3 STREET ADDRESS	202 N. GRADY AVE	
CITY-ST-ZIP	TAMPA FL 33606		6.4 CITY-ST-ZIP	TAMPA FL 33609	

PE 8-20

CR2E037 (4/97)

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 REQUIRED Helen Parkhill 7/24/97