

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90048 012 ****61.25

DOCUMENT # 739459 1. Entity Name FILIPINO-AMERICAN CLUB OF PINELLAS COUNTY, INC.					
Principal Place of Business 3768 103RD AVE. NORTH CLEARWATER, FL 33762 US				Mailing Address P.O. BOX 261 PINELLAS PARK, FL 33780 US	
2. Principal Place of Business - No P.O. Box # 7080 41ST STREET Suite, Apt. #, etc. NORTH City & State PINELLAS PARK FL Zip 33781 Country PINELLAS		3. Mailing Address P.O. Box 261 Suite, Apt. #, etc. Pinellas Park City & State FL Zip 33780 Country Pinellas		40017410 01262008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-1764381 Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SANTOS, ANNA 3768 103RD AVE. NORTH CLEARWATER, FL 33762				7. Name and Address of New Registered Agent Name AMANCIA MANCOL Street Address (P.O. Box Number is Not Acceptable) 7080 41ST STREET, NORTH City PINELLAS PARK FL Zip Code 33781	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Amancia Mancol, President (08-05)</u> DATE <u>2/01/08</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P ☐ Delete	TITLE	PRESIDENT ☐ Change ☒ Addition		
NAME	SANTOS, ANNA	NAME	AMANCIA MANCOL		
STREET ADDRESS	3768 103 AVE N	STREET ADDRESS	7080 41ST ST NORTH		
CITY-ST-ZIP	CLEARWATER, FL 33762	CITY-ST-ZIP	PINELLAS PARK FL 33781		
TITLE	V ☒ Delete	TITLE	BOARD MEMBER ☐ Change ☒ Addition		
NAME	ASUNCION, ALMA	NAME	SYLVIA GONZALES		
STREET ADDRESS	8249 44 ST N	STREET ADDRESS	126 81ST AVE N		
CITY-ST-ZIP	PINELLAS PARK, FL 33780	CITY-ST-ZIP	SP. PETERSBURG FL 33702		
TITLE	SEC ☐ Delete	TITLE	BOARD MEMBER ☐ Change ☒ Addition		
NAME	QUEZON, ROSALINDA	NAME	Isabelita Smith		
STREET ADDRESS	4324 69TH AVE. NORTH	STREET ADDRESS	5546 17TH AVE. N		
CITY-ST-ZIP	PINELLAS PARK, FL 33781	CITY-ST-ZIP	ST. PETERSBURG, FL 33710		
TITLE	TREA ☐ Delete	TITLE	AUDITOR ☐ Change ☒ Addition		
NAME	UMALI, AMOR	NAME	LEONARDO QUEZON		
STREET ADDRESS	7005 54TH AVE. N	STREET ADDRESS	4324 69TH AVE. N		
CITY-ST-ZIP	SAINT PETERSBURG, FL 33709	CITY-ST-ZIP	PINELLAS PARK, FL 33781		
TITLE	AUDI ☒ Delete	TITLE	BOARD MEMBER ☐ Change ☒ Addition		
NAME	SORIANO, CESAR	NAME	MARY ANN BRANESKY		
STREET ADDRESS	1741 GLENLAKES BLVD. N.	STREET ADDRESS	4022 69TH ST. N		
CITY-ST-ZIP	SAINT PETERSBURG, FL 33716	CITY-ST-ZIP	ST. PETERSBURG, FL 33709		
TITLE	D ☐ Delete	TITLE	BOARD MEMBER ☐ Change ☒ Addition		
NAME	CAUNIN, MYRNA	NAME	COLA LEGASPI		
STREET ADDRESS	1515 PINELLAS BAYWAY D39	STREET ADDRESS	7013 50TH AVE N		
CITY-ST-ZIP	TIERRA VERDE, FL 33715	CITY-ST-ZIP	ST. PETERSBURG, FL 33709		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <u>Amancia Mancol - AMANCIA MANCOL</u> Date <u>2/1/08</u> (727) 522-4700 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					