

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION.
ANNUAL REPORT
1996



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

DOCUMENT # **744000** (1)

1. Corporation Name

TAMPA MARITIME ASSOCIATION, INC.



Principal Place of Business

Mailing Address

101 SO 13 STR
TAMPA FL 33602
US

101 SO 13 STR
TAMPA FL 33602
US

3. Date Incorporated or Qualified

08/21/1978

3a. Date of Last Report

02/14/1995

2. Principal Place of Business

2a. Mailing Address

21 2379 Guy N. Verger Blvd

26 2379 Guy N. Verger Blvd.

4. FEI Number

59-2250077

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

City & State

City & State

23 Tampa, FL

28 Tampa, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

Country

24 33605

25 US

Zip

Country

29 33605

30 US

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

**PIEPER, NATHANIEL G.W.
1700 ASHLEY TOWER
100 SOUTH ASHLEY DR.
TAMPA FL 33602**

81 Name

Schmidt, Rudolf

82 Street Address (P.O. Box Number is Not Acceptable)

83

2379 Guy N. Verger Blvd.

84 City

Tampa

FL

85 Zip Code

33605

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

Rudolf Schmidt VST

July 2, 1996

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 **P** ☒ DELETE
NAME **CASELLA, J.**
STREET ADDRESS **2900 GUY VERGER BLVD.**
CITY-ST-ZIP **TAMPA FL**

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME **VST/D**
1.3 STREET ADDRESS **Schmidt, Rudolf**
1.4 CITY-ST-ZIP **2379 Guy N. Verger Blvd.**
Tampa, FL 33605

TITLE **VST** ☒ DELETE
NAME **LITTLE, GARDELL**
STREET ADDRESS **101 S. 13TH ST.**
CITY-ST-ZIP **TAMPA FL**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **P/D**
2.3 STREET ADDRESS **Casella, J.**
2.4 CITY-ST-ZIP **2900 Guy N. Verger Blvd, Tampa FL**

TITLE **D** ☒ DELETE
NAME **WILLIAMS, MARVIN**
STREET ADDRESS **101 S. 13TH ST.**
CITY-ST-ZIP **TAMPA FL**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **D**
3.3 STREET ADDRESS **Williams, Marvin**
3.4 CITY-ST-ZIP **2379 Guy N. Verger Blvd, Tampa FL**

TITLE **D** ☒ DELETE
NAME **BROWN, E.**
STREET ADDRESS **3189 GLEN RIDGE CT.**
CITY-ST-ZIP **PALM HARBOR FL**

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

TITLE **D** ☒ DELETE
NAME **SAVAGE, A.**
STREET ADDRESS **2900 S 20 ST**
CITY-ST-ZIP **TAMPA FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME **100001901901**
5.3 STREET ADDRESS **-07/23/96--01086--006**
5.4 CITY-ST-ZIP *****61.25**

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 119.07(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 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:

Rudolf Schmidt VST

July 2, 1996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (3/96)