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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Feb 07 1997 8:00am

Secretary of State

(96/6)

Daytime Phone # 0049773

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

744693

9801 OAK STREET N.E.

ST. PETERSBURG FL 33702

STREET ADDRESS

(3)

THE YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF TAMPA BAY, INC.

Principal Place of Business Mailing Address 655-2ND AVE..S. 655-2ND AVE..S. ST. PETERSBURG FL 33701-4103 ST. PETERSBURG FL 33701 3. Date incorporated or Qualified 3a. Date of Last Report 10/24/1978 04/02/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-0638517 same same 26 Not Applicable Suite Apt # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199,032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SANCHEZ, PEGGY PEGGY SANCHEZ same 82 Street Address (P.O. Box Number is Not Acceptable) 655-2ND AVE., S. 83 ST PETERSBURG FL 33701 City 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 submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes. mill tire, typed of purified name of registered agent and title it applicables SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change PD **Z** DELETE Addition TITLE 1.1 TITLE JACKSON, SHARON K NAME 1.2 NAME Carlen Petersen 8001 MACOMA DRIVE NE STREET ADDRESS 1.3 STREET ADDRESS 2582 Anderson Dr. W. ST PETERSBURG FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Clearwater, FL 34621 DELETE TITLE **VPD** 21 TITLE Change ☐ Addition VPD - Kris Robinson RHODE, BARBARA NAME 22 NAME 11450 Harbor Way, #5002 116 8 AVE NE STREET ADDRESS 2.3 STREET ADDRESS Largo, ML ST. PETERSBURG FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP VP-Operations - Laurie Stone Addition DELETE TITLE 31 TITLE JOHNSON, NANCY NAME 3.2 NAME 4750 Dolphin Cay Lane S., #403D **4831 NAPPOLI COURT NE** STREET ADDRESS 3.3 STREET ADDRESS St. Petersburg, FL 33711 ST. PETERSBURG FL 3.4. CITY-ST-ZIP CITY - ST - ZIP Change X DEFELE TITLE TD 4.1 TITLE TD - Karen Steinmetz HANSEN, CONNIE NAME 4.2 NAME 1064 45th Avenue NE 10433 SHADY OAK LANE STREET ADDRESS 4.3 STREET ADDRESS St. Petersburg, FL LARGO FL CITY - S1 - ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE TITLE - Connie Hansenhange TAYLOR, TEQUILLA NAME 52 NAME 10000 W. Bay Street 13413 SUNVALE PL STREET ADDRESS 5.3 STREET ADDRESS Seminole, FL 33776 TAMPA FL CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME JACKSON, SHARON 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.

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR