

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 749635 (9)

1. Corporation Name

THE ST. PETERSBURG JUNIOR COLLEGE DEVELOPMENT FOUNDATION, INC.



Principal Place of Business

Mailing Address

P.O. BOX 13489 (ST. PETERSBURG, FL. 33733)
8580 66TH STREET NORTH
PINELLAS PARK FL 34665-1207

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8580 66TH STREET NORTH
PINELLAS PARK FL 34665-1207

3. Date Incorporated or Qualified
11/02/1979

3a. Date of Last Report
02/13/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

59-1954362

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

**HENNINGER, DAVID
8580 66TH ST. NO.
PINELLAS PARK FL 34665**

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 ☐ DELETE
NAME **P CARLISLE, DAN W.,**
STREET ADDRESS **2085 GULF-TO-BAY BLVD.**
CITY-ST-ZIP **CLEARWATER FL 34625**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **P GREGORY, Thomas H.**
1.3 STREET ADDRESS **6274 18th Street NE**
1.4 CITY-ST-ZIP **St. Petersburg, FL 33702**

TITLE ☒ DELETE
NAME **SD BARBER, G. MAX**
STREET ADDRESS **8580 66TH ST. NO.**
CITY-ST-ZIP **PINELLAS PARK, FL.00000**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **SD RITCHIE, William J.**
2.3 STREET ADDRESS **8580 66th Street North**
2.4 CITY-ST-ZIP **Pinellas Park, FL 34665**

TITLE ☐ DELETE
NAME **PE ROTHMAN, MAURICE A. ,**
STREET ADDRESS **5700-70TH AVE. NORTH**
CITY-ST-ZIP **PINELLAS PARK FL 34665**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME **T CUNNINGHAM, MAC H JR**
STREET ADDRESS **8580 66TH ST NO**
CITY-ST-ZIP **PINELLAS PARK, FL.00000 34665**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **T WILLIAMS, Dianna**
4.3 STREET ADDRESS **8580 66th Street North**
4.4 CITY-ST-ZIP **Pinellas Park, FL 34665**

TITLE ☒ DELETE
NAME **D BAYNARD, MILDRED M.**
STREET ADDRESS **627 BRIGHTWATERS BLVD NE**
CITY-ST-ZIP **ST PETERSBURG FL 33704**

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **D ROEHRIG, W. Dana**
5.3 STREET ADDRESS **1132 Snell Isle Blvd. NE**
5.4 CITY-ST-ZIP **St. Petersburg, FL 33704**

TITLE ☒ DELETE
NAME **D ARFARAS, HELEN C.**
STREET ADDRESS **1108 SOUTH FLORIDA AVENUE**
CITY-ST-ZIP **TARPON SPRINGS FL 34689**

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME **D O'HEARN, Sue**
6.3 STREET ADDRESS **2764 69th Ave. South**
6.4 CITY-ST-ZIP **St. Petersburg, FL 33712**

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Executive Director/Secretary

2/23/96

(813) 341-3304

Date

Daytime Phone #

CR2E037 (12/95)