

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 17 1998 8:00am
Secretary of State

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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | 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 33781 - 1207
US

P.O. BOX 13489 (ST. PETERSBURG, FL 33733)
8580 66TH STREET NORTH
PINELLAS PARK FL 33781-1207

3. Date Incorporated or Qualified

11/02/1979

4. FEI Number

59-1954362

Applied For

Not Applicable

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

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☐ No

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

10. Name and Address of New Registered Agent

• **HENNINGER, DAVID**
• **8580 66TH ST. NO.**
• **PINELLAS PARK FL 33781-1207**

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 **P** ☒ DELETE
NAME **GREGORY, THOMAS H.**
STREET ADDRESS **6274 18TH STREET NE**
CITY - ST - ZIP **ST. PETERSBURG FL**

1.1 TITLE **P** ☒ Change ☐ Addition
1.2 NAME **Alfred T. May**
1.3 STREET ADDRESS **4983 Bacopa Lane South, #105**
1.4 CITY - ST - ZIP **St. Petersburg, FL 33715**

TITLE **SD** ☐ DELETE
NAME **SLOAN, JOHN B**
STREET ADDRESS **8580 66TH ST N**
CITY - ST - ZIP **PINELLAS PARK FL 33781-1207**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

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

3.1 TITLE **VP** ☒ Change ☐ Addition
3.2 NAME **Helen K. Leslie**
3.3 STREET ADDRESS **2304 Kingfish Lane**
3.4 CITY - ST - ZIP **Clearwater, FL 33762**

TITLE **T** ☐ DELETE
NAME **WILLIAMS, DIANNA**
STREET ADDRESS **8580 66TH STREET NORTH**
CITY - ST - ZIP **PINELLAS PARK, FL 33781-1207**

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

TITLE **PE** ☒ DELETE
NAME **MAY, ALFRED T**
STREET ADDRESS **6600 SUNSET WAY, APT B-304**
CITY - ST - ZIP **ST PETE BEACH FL**

5.1 TITLE **PE** ☒ Change ☐ Addition
5.2 NAME **Robert F. Shuck**
5.3 STREET ADDRESS **880 Carillon Parkway**
5.4 CITY - ST - ZIP **St. Petersburg, FL 33716**

TITLE **D** ☒ DELETE
NAME **LESUE, HELEN K**
STREET ADDRESS **1000 - 30TH ST S**
CITY - ST - ZIP **ST PETERSBURG FL**

6.1 TITLE **D** ☒ Change ☐ Addition
6.2 NAME **Thomas H. Gregory**
6.3 STREET ADDRESS **6274 - 18th Street NE**
6.4 CITY - ST - ZIP **St. Petersburg, FL 33702**

14. I 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:

Executive Director/Secretary

1/21/98

(813) 341-3304

CR2E037 (10/97)