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Feb 04 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **750024** (2)

1. Corporation Name

**ANN STURGEON MEMORIAL ROSE GARDEN FUND, INC.**

Principal Place of Business

13401 INDIAN ROCKS ROAD  
LARGO FL ~~34644~~ **33774**

Mailing Address

13401 INDIAN ROCKS ROAD  
LARGO FL ~~34644~~ **33774**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

**33774**

25

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**33774**

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9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**12/04/1979**

4. FEI Number

**NOT APPLICABLE**

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

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

**MC MANUS, R. BRUCE**  
**79 OVERBROOK BLVD.**  
**LARGO FL 33540**

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

TITLE	<b>TD</b>	<input type="checkbox"/> DELETE
NAME	<b>TAYLOR, VONDA M</b>	
STREET ADDRESS	<b>1372 HIBISCUS ST.</b>	
CITY-ST-ZIP	<b>CLEARWATER FL 34615</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>TORPEY, DOROTHEE</b>	
STREET ADDRESS	<b>3244 HILARY CIRCLE</b>	
CITY-ST-ZIP	<b>PALM HARBOR FL</b>	

TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>WILEY, BEN R</b>	
STREET ADDRESS	<b>3911 MCKAY CREEK</b>	
CITY-ST-ZIP	<b>LARGO FL</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>FESSENBECKER, KATHY</b>	
STREET ADDRESS	<b>3105 SWAN LN</b>	
CITY-ST-ZIP	<b>SAFETY HARBOR FL</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>REISER, KARL</b>	
STREET ADDRESS	<b>2904 SHERWOOD RD.</b>	
CITY-ST-ZIP	<b>COLUMBUS OH</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>ROSATI, CARL A.</b>	
STREET ADDRESS	<b>2391 NURSERY ROAD</b>	
CITY-ST-ZIP	<b>CLEARWATER FL</b>	

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

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

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

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

5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>\$</b>
<b>TORPEY, DOROTHEE</b>
<b>3244 Hilary Circle</b>
<b>Palm Harbor, FL 34684</b>

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:

**Vonda M. Taylor, Treasurer**

**1/14/98 (813)595-2914**

CR2E037 (10/97)

Board Members for Ann Sturgeon Memorial Rose Garden Fund, Inc.

Liz Buchanan - Director  
2367-B Flanders Way  
Safety Harbor, FL 34695

Geoffrey Gray - Director  
7015 120th St. N.  
Seminole, FL 33772

Roger LaPlume - Director  
1600 San Remo Ave.  
Clearwater, FL 33756

Ralph Scheidenhelm - Director  
2226 Donato Dr.  
Belleair Beach, FL 34635

George Storm - Director  
2882 Gulf-to-Bay Blvd. Lot #212  
Clearwater, FL 33755

Jay Zinn - Director  
483 Corvette Dr.  
Largo, FL 33771

Thomas D. Feaster - Director  
150 Howard Dr.  
Largo, FL 33770