FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 751505

1. Corporation Name

(9)

PINELLAS GENEALOGY SOCIETY, INC.				LIABER (RRA) BUR HAR GIAN AND	ari diğir bidir bibi dibi digir bidir bidir bibi
Principal Plac	e of Business	Mailing Address			8111 B1811 87815 81811 81811 B1811 87811 1981
8476 - 15TH WAY NORTH					
		***		3. Date Incorporated or Qualified 03/12/1980	3a. Date of Last Report 08/14/1996
2. Principal F	Place of Business	2a. Mailing Address 26		4. FEI Number 59-2374859	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation has liability for Florida Statutes	- ~:
24	9. Name and Address of Current		[30]	10. Name and Address of New Re	
			81 Name	10. 110111	A IOIOI OO PAOOII
HAZEL, MARJORIE E.		82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
	th way north Ersburg FL 33702-2812		83		
7			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statu	ites, the above-named co	rporation submits this statement for the	purpose of changing its registered
11. Pursuant Office or ragent. La	to the provisions of Sections 617.0502 registered agent, or both, in the State or familiar with, and accept the obligat	and 617.1508, Florida Statu If Florida. Such change was ions of, Section 617.0503, F	ites, the above-named cor authorized by the corpora lorida Statutes.	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
11. Pursuant Office or ragent. La SIGNATURE			ites, the above-named cor authorized by the corpora lorida Statutes.	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
SIGNATURE.	Signature, typed or printed hame of registered agent	and title II applicable. (NO	TE: Registered Agent signature requ	uired when reinstaling)	DAYE
SIGNATURE	Signature, typed or printed name of registered agent	and title II applicable. (NO DIRECTORS	TE: Registered Agent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12
SIGNATURE. 12. TITLE	Signature, typed or printed name of registered agent OFFICERS AND PD	and title II applicable. (NO	TE: Registered Agent signature requests. 13. 1.1 TITLE	uired when reinstalling) ADDITIONS/CHANGES TO OFFI PRESIDE NT	DATE CERS AND DIRECTORS IN 12 Change Addition
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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.

SIGNATURE:

IGNATURE AND PRED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

3/8/97 8/3-576-4899

FILED

Apr 03 1997 8:00am

Secretary of State