FILE NOW: FILING FEE IS $61.25

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May 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **751700** (6)

1. Corporation Name
SEVENTIETH SOMERSET PLACE, INC.

Principal Place of Business	Mailing Address
1300-1616 70TH ST., NO. ST PETERSBURG FL 33710 US	P.O. BOX 41383 ST. PETERSBURG FL 33743-1383 US

3. Date Incorporated or Qualified: 03/25/1980
3a. Date of Last Report: 08/16/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 | Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 | Country — 30

4. FEI Number: 59-1822316 ☐ 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

HANSON, DELLOR
1506 70 ST NORTH
ST PETE FL 33710

10. Name and Address of New Registered Agent

81 Name: JAMES White
82 Street Address (P.O. Box Number is Not Acceptable): 1444 70th ST N
83
84 City: ST. PETERSBURG **FL** 85 Zip Code: 33710

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: James White — DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	D	☐ Change ☒ Addition
NAME	BURNESS, JOHN		1.2 NAME	Sedgwick, Art	
STREET ADDRESS	1370 70 ST N		1.3 STREET ADDRESS	6827 16th Ave N	
CITY-ST-ZIP	ST. PETERSBURG, FL 0		1.4 CITY-ST-ZIP	St. Petersburg, FL 33710	
TITLE	~~D~~	☐ DELETE	2.1 TITLE	President	☒ Change ☐ Addition
NAME	WHITE, JAMES		2.2 NAME	JAmes White	
STREET ADDRESS	1444 70 ST N		2.3 STREET ADDRESS	1444 70th ST N	
CITY-ST-ZIP	ST. PETERSBURG FL		2.4 CITY-ST-ZIP	ST Petersburg FL 33710	
TITLE	VP	☒ DELETE	3.1 TITLE	VP - D	☐ Change ☒ Addition
NAME	BOURGAULT, ROGER		3.2 NAME	Peter Michael	
STREET ADDRESS	1408 70 ST N		3.3 STREET ADDRESS	1432 70th ST N	
CITY-ST-ZIP	ST PETE FL		3.4 CITY-ST-ZIP	St. Petersburg, FL 33710	
TITLE	T - D	☐ DELETE	4.1 TITLE	Moody, Dwight - D	☐ Change ☐ Addition
NAME	MOODY, DWIGHT		4.2 NAME	1566 70th ST N	
STREET ADDRESS	1566 70 ST N		4.3 STREET ADDRESS	St Petersburg FL 33710	
CITY-ST-ZIP	ST PETERSBURG, FL 00000		4.4 CITY-ST-ZIP		
TITLE	P	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HANSON, DELLOR		5.2 NAME		
STREET ADDRESS	1506 70TH ST., NO.		5.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		5.4 CITY-ST-ZIP		
TITLE	S - D	☐ DELETE	6.1 TITLE	S - D	☐ Change ☐ Addition
NAME	DAWSON, ROBIN		6.2 NAME	Robin Dawson	
STREET ADDRESS	1610 70 ST N		6.3 STREET ADDRESS	1610 70th ST N	
CITY-ST-ZIP	ST PETE FL		6.4 CITY-ST-ZIP	St Petersburg, FL 33710	

CR2E037 (9/96)

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: James White SIGNATURE REQUIRED — April 17, 97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0051484