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Apr 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **759712** (3)

1. Corporation Name

ST. ANTHONY'S ANCILLARY SERVICES, INC.

Principal Place of Business

Mailing Address

P O BOX 12588
ST PETERSBURG FL 33733

P O BOX 12588
ST PETERSBURG FL 33733-2588



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 **1200 SEVENTH AVENUE N**

23 City & State
ST. PETERSBURG, FL

24 Zip
33705

25 Country

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

3. Date Incorporated or Qualified
08/20/1981

3a. Date of Last Report
04/25/1996

4. FEI Number
59-2128990

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

SHUMAKER, REVONDA L.
1200 SEVENTH AVENUE NORTH
1201 5TH AVENUE NORTH
ST. PETERSBURG FL 33705

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 **PD** ☒ DELETE
NAME ~~**BIEBEL, JOHN**~~
STREET ADDRESS **3003 W. DR. MARTIN LUTHER KING BLVD.**
CITY-ST-ZIP **TAMPA FL**

TITLE **VD** ☐ DELETE
NAME **SHUMAKER, REVONDA L.**
STREET ADDRESS **3003 W. DR. MARTIN LUTHER KING BLVD.**
CITY-ST-ZIP **TAMPA FL**

TITLE **EVPD** ☐ DELETE
NAME **CHAWK, GARY W.**
STREET ADDRESS **3003 W. DR. MARTIN LUTHER KING BLVD.**
CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ DELETE
NAME **PITISCI, GILBERT M**
STREET ADDRESS **1201 5TH AVENUE N**
CITY-ST-ZIP **TAMPA FL**

TITLE **VD** ☐ DELETE
NAME **MALLAH, ISAAC**
STREET ADDRESS **1201 5TH AVENUE N**
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE **VD** ☐ DELETE
NAME **SCOTT, CHARLES**
STREET ADDRESS **1201 5TH AVENUE N**
CITY-ST-ZIP **ST. PETERSBURG FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **1200 SEVENTH AVENUE NORTH**
2.4 CITY-ST-ZIP **ST. PETERSBURG, FL 33705**

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

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME **S**
4.3 STREET ADDRESS **PITISCI, GILBERT M.**
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **C**
5.3 STREET ADDRESS **MALLAH, ISAAC**
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS **600002142626**
6.4 CITY-ST-ZIP **-04/14/97--01040--032**
*****245.00**

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:

SIGNATURE REQUIRED

REVONDA L. SHUMAKER

Revonda Shumaker

(813) 825-1074

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0051381

CR2E037 (9/96)

AW 4-14-97