FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -9 AM 9:06

DOCUMENT # 761473 (8)

1. Corporation Name
TAMPA NEIGHBORHOOD WATCH ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1710 N. TAMPA ST. TAMPA FL 33602 US	1710 N. TAMPA STREET TAMPA FL 33602 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/14/1982
3a. Date of Last Report: 04/27/1994
4. FEI Number: 59-2201398 ☐ 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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

QUINN, SHARIE
1710 N. TAMPA STREET
TAMOPA FL 33602

10. Name and Address of New Registered Agent

81 Name: ANTHONY EVAN ST. IVES
82 Street Address (P.O. Box Number is Not Acceptable): 1710 North Tampa Street
83
84 City: Tampa FL 85 Zip Code: 33602

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: A. Evan St. Ives — 11 February 1995
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	T	1.1 TITLE	Vice President/Treasurer	☒ Change ☐ Addition
NAME	QUINN, SHARIE	1.2 NAME	Anthony Evan St. Ives	V/T/D
STREET ADDRESS	9323 N HIGHLAND AVE	1.3 STREET ADDRESS	1227 East Powhatan Avenue	
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	Tampa, FL 33604-7231	
TITLE	P	2.1 TITLE	P/D	☒ Change ☐ Addition
NAME	HODGES, JOYCE	2.2 NAME	Joyce Hodges	
STREET ADDRESS	9614 CENTRAL AVE., SUITE 23	2.3 STREET ADDRESS	9614 Central Ave, Suite 23	
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	Tampa, FL 33604	
TITLE	S	3.1 TITLE	Secretary S/D	☒ Change ☐ Addition
NAME	JONES, ROSALIE	3.2 NAME	Paul Massaro	
STREET ADDRESS	4523 ASHMORE DRIVE	3.3 STREET ADDRESS	2307 Knollwood Place	
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	Tampa, FL 33604	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: A. Evan St. Ives — 11 February 1995 — 813-274-5907
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

A. EVAN ST. IVES

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