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FILED

Feb 24 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # 761473 (8)
1. Corporation Name
TAMPA NEIGHBORHOOD WATCH ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1710 N. TAMPA ST.
TAMPA FL 33602
US1710 N. TAMPA STREET
TAMPA FL 33602-2648
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

3. Date Incorporated or Qualified
01/14/19823a. Date of Last Report
05/19/1996

4. FEI Number

59-2201398

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. 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

MCARTHY, STEVE M.
1710 NORTH TAMPA STREET
TAMPA FL 33602

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VPT ☒ DELETE
NAME ST. IVES, ANTHONY E
STREET ADDRESS 1227 EAST POWHATAN AVENUE
CITY-ST-ZIP TAMPA FL1.1 TITLE Secretary, Director ☐ Change ☒ Addition
1.2 NAME Bernice Pelham
1.3 STREET ADDRESS 1004 E. North Bay St
1.4 CITY-ST-ZIP Tampa, FL 33603-4331TITLE PD ☐ DELETE
NAME MCCARTHY, STEVE M.
STREET ADDRESS 2330 E. 112TH AVE.
CITY-ST-ZIP TAMPA FL 336122.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE ☒ DELETE
NAME POSTERARO, EARLENE SMITH
STREET ADDRESS 816 W. LOWRY LANE
CITY-ST-ZIP TAMPA FL 336043.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE TD ☒ DELETE
NAME LONDON, HEIDI
STREET ADDRESS 402 ERIE AVE.
CITY-ST-ZIP TAMPA FL 33606-36424.1 TITLE Treasurer, Director ☒ Change ☐ Addition
4.2 NAME Lunelle Siegel
4.3 STREET ADDRESS 6107 S. Elkins
4.4 CITY-ST-ZIP Tampa, FL 33611TITLE VD ☒ DELETE
NAME ST. IVES, ANTHONY E.
STREET ADDRESS 1227 EAST POWATAN AVE.
CITY-ST-ZIP TAMPA FL 336045.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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. Lunelle M. Siegel

SIGNATURE:

Lunelle M. Siegel, Treasurer

2/8/97

813-832-1594

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0047008

CR2E037 (9/96)