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Mar 17 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 766591 (2)

1. Corporation Name

BUSINESS ASSISTANCE COUNCIL, INC.



Principal Place of Business

Mailing Address

C/O DEE ECKERT  
2621 COVE CAY DT. #503  
CLEARWATER FL 34620

C/O DEE ECKERT  
2621 COVE CAY DT. #503  
CLEARWATER FL 34620-1355

3. Date incorporated or Qualified  
01/18/1983

3a. Date of Last Report  
03/01/1996

2. Principal Place of Business

2a. Mailing Address

21 C/O RAMESH PAREKH

26 C/O BAC PRESIDENT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 2700 E. BAY DR # 107

27 P.O. BOX 703

City & State

City & State

23 LARGO, FLORIDA

28 CLEARWATER FL

Zip

Country

Zip

Country

24 33771

25 USA

29 34617

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PAREKH, RAMESCH  
2700 E. BAY DR #109  
LARGO FL 34641

81 Name

RAMESH PAREKH

82 Street Address (P.O. Box Number is Not Acceptable)

2700 EAST BAY DRIVE

83

SUITE 107

84 City

LARGO

FL

85 Zip Code

33771

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]* RAMESH PAREKH - TREAS. 3/5/97

(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 D ☒ DELETE  
NAME MALLORY, SALLY  
STREET ADDRESS 1381 S. FT. HARRISON AVE.  
CITY-ST-ZIP CLEARWATER FL 34618

1.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME KELLY MURPHY  
1.3 STREET ADDRESS 13755 U.S. 19 N.  
1.4 CITY-ST-ZIP CLEARWATER, FL 34624

TITLE D ☒ DELETE  
NAME SCHULMAN, DENNIS  
STREET ADDRESS 9591 128TH TERRACE NORTH  
CITY-ST-ZIP LARGO FL

2.1 TITLE D ☐ Change ☒ Addition  
2.2 NAME HANK ERSTEIN  
2.3 STREET ADDRESS 1844 N. BELCHER RD., #1019  
2.4 CITY-ST-ZIP CLEARWATER, FL 34625

TITLE D ☒ DELETE  
NAME KING, MICHAEL  
STREET ADDRESS 7946 62ND ST. N.  
CITY-ST-ZIP PINELLAS PARK FL

3.1 TITLE D ☐ Change ☒ Addition  
3.2 NAME ROBERT HAUCK  
3.3 STREET ADDRESS 8611 SPARTAN CT  
3.4 CITY-ST-ZIP TAMPA, FL 33634

TITLE D ☒ DELETE  
NAME BROWN, JAMES COL  
STREET ADDRESS 12661 INDIAN ROCKS RD.  
CITY-ST-ZIP LARGO FL 34644-2302

4.1 TITLE D ☐ Change ☒ Addition  
4.2 NAME RAMESH PAREKH  
4.3 STREET ADDRESS 2700 E. BAY DR #107  
4.4 CITY-ST-ZIP LARGO, FL 33771

TITLE P ☒ DELETE  
NAME HAUCK, ROB  
STREET ADDRESS 8811 SPARTAN COURT  
CITY-ST-ZIP TAMPA FL

5.1 TITLE P ☐ Change ☒ Addition  
5.2 NAME JACQUELINE SMITH  
5.3 STREET ADDRESS 5401 W. KENNEDY BLVD, STE 171  
5.4 CITY-ST-ZIP TAMPA, FL 33609

TITLE VP ☒ DELETE  
NAME MADOW, DR. EVAN  
STREET ADDRESS 10801 STARKEY ROAD #107  
CITY-ST-ZIP LARGO FL

6.1 TITLE VP ☐ Change ☒ Addition  
6.2 NAME DENNIS SCHULMAN  
6.3 STREET ADDRESS 9591 - 128TH TERRACE NO.  
6.4 CITY-ST-ZIP LARGO, FL 34643

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]* RAMESH PAREKH 3/5/97

CR2E037 (9/96)