2002 UNIFORM BUSINESS REPORT (UBR)

Mar 13, 2002 8:00 am **DOCUMENT # 769967 Secretary of State** 1. Entity Name 03-13-2002 90044 021 ****70.00 TAMPA/HILLSBOROUGH COUNTY YOUTH COUNCIL, INC. Principal Place of Business Mailing Address 102 E 7TH AVE 102 E 7TH AVE TAMPA FL 33602 **TAMPA FL 33602** HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-2387402 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BRADLEY: SHELISIA 102 E:7TH AVE **TAMPA FL 33602** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. (9/01) Delete President TITLE Addition TITI F Ivory Rodriquez 9225 Bay Plaza Boulevard Suite 405 GONZALEZ, MARGARITA NAME NAME **CR2E037** STREET ADDRESS 306 E JACKSON ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Tampa, FL 33619 Co-Vice Chair TAMPA FL 33602 ☐ Change ☐ Delete TITLE TITLE Bill Ratliffe 200 South Parker Street NAME NAME SHIMBERG, JAMES STREET ADDRESS STREET ADDRESS 400 N ASHLEY DR. Tampa, Florida 33606 CITY-ST-ZIP CITY-ST-7IP TAMPA FL Change ☐ Addition ☐ Delete NAME SMITH, BRYON NAME STREET ADDRESS 100 2ND AVE SOUTH STE 600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33701 ☐ Delete ☐ Change ☐ Addition TITLE TITLE BRADLEY, SHELISIA NAME NAME STREET ADDRESS STREET ADDRESS 102 E 7TH AVE CITY-ST-ZIP CITY-ST-7IP **TAMPA FL 33602** ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME **BOWDEN, BOBBY** NAME STREET ADDRESS STREET ADDRESS 306 E JACKSON ST CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33602** ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME HARRISON, SHAWN NAME 315 E KENNEDY BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33602** 12. I 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 report or supplemental 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 10 or Block 11 if

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changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 2-12-02 / 2