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

APPROVED AND FILED
95 MAY -1 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N00014

1. Corporation Name: TAMPA/HILLSBOROUGH URBAN LEAGUE INC.

700001519867
-06/21/95--01100--021
DO NOT WRITE IN THIS SPACE ****70.00

Principal Place of Business	Mailing Address
1405 TAMPA PARK PLAZA TAMPA FL 33605	1405 TAMPA PARK PLAZA TAMPA FL 33605

3. Date Incorporated or Qualified: 11/23/1983
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-0657333 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address	
21 SAME	26	5. Certificate of Status Desired ☑ — $8.75 Additional Fee Required
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
City & State 23	City & State 28	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ — $68.75 Supplemental Fee Not Required
Zip 24 / Country 25	Zip 29 / Country 30	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
WRIGHT-DOUGLAS KAYDELL 110 N ARMEN THE WRIGHT BLDG TAMPA FL 33605	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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C/D	11 TITLE	☐ Change ☐ Addition
NAME	WRIGHT-DOUGLAS KAYDELL	12 NAME	
STREET ADDRESS	110 N ARMEN	13 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	14 CITY-ST-ZIP	
TITLE	V/D	21 TITLE	V/D ☐ Change ☐ Addition
NAME	HUDSON KEN	22 NAME	RICHARD EGBERT
STREET ADDRESS	3109 W DR, MLK, JR BLVD	23 STREET ADDRESS	7650 W. COURTNEY CAMPBELL
CITY-ST-ZIP	Tampa FL	24 CITY-ST-ZIP	TAMPA FL
TITLE	V/D	31 TITLE	V/D ☐ Change ☐ Addition
NAME	LORENZO JANET	32 NAME	THOMAS HUGGINS
STREET ADDRESS	900 ASHLEY ST.	33 STREET ADDRESS	4601 W. KENNEDY BOULEVARD SUITE 200
CITY-ST-ZIP	TAMPA FL	34 CITY-ST-ZIP	TAMPA FL
TITLE	T/D	41 TITLE	☐ Change ☐ Addition
NAME	WILHITE, SARAH	42 NAME	
STREET ADDRESS	3812 GUNN HIGHWAY	43 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	44 CITY-ST-ZIP	
TITLE	T/D	51 TITLE	T/D ☐ Change ☐ Addition
NAME	FOXX-KNOWLES SHIRLEY	52 NAME	EARL KAGLER
STREET ADDRESS	206 N HABANA AVE	53 STREET ADDRESS	1933 E. HILLSBOROUGH Ave.
CITY-ST-ZIP	TAMPA FL	54 CITY-ST-ZIP	TAMPA FL
TITLE	S/D	61 TITLE	S/D ☐ Change ☐ Addition
NAME	HUGGINS THOMAS	62 NAME	DR. ALMA HIRES
STREET ADDRESS	4601 W.KENNEDY BLVD	63 STREET ADDRESS	P.O. BOX 30030 N/A
CITY-ST-ZIP	TAMPA FL	64 CITY-ST-ZIP	TAMPA FL NOT FILED BY MAY 1

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: _____ 4/7/95 (813) 224-8320
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR — Date — Daytime Phone Number