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NONPROFIT **CORPORATION** ANNUAL REPORT



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

1996

N01071 DOCUMENT #
1. Corporation Name

(2)

DACADEMA COMMINITY CULIDOU INC

Principal Place of Business 112 70TH STREET SOUTH ST. PETERSBURG FL 33707 12. Principal Place of Business 2.a. Making Address 2.a. Making Address 2.a. Making Address 3. Date incorporated or Qualified 01/24/1984 04/12/1985 04/12/19	· · · · · · · · · · · · · · · · · · ·	ZNA COMMUNIT CHUNCE	, 110			
ST. PETERSBURG FL 33707 ST. PETERSBURG FL 33707 ST. PETERSBURG FL 33707 3. Date incorporated or Qualified 01/24/1984 2. Principal Place of Business 2. 2a. Mailing Address 4. FET Number 59-0624434 Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 4. FET Number 59-0624434 City & State 2. County 5. County 6. Fee Required Page 1. Principal Place of Status Desired 2. Principal Place of Status Desired 3. Principal Place of Place	 Principal Place 	e of Business	Mailing Address		6 10011101 011 00101 15031 60111 10001 11	DI ESBUT DIOLE DIDIS ALBIT BIBIL DI DEI CODI
2. Principal Place of Business 2a. Making Address 2b. Making Address 2c. Making Address						
Suite, Apt. #, etc.					01/24/1984	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. S. Certificate of Status Desired \$8.75 Additional Fee Required		lace of Business			4. FEI Number 50-0624434	<u> </u>
22 27 28 28 29 29 29 29 30 30 30 30 30 30 30 3		h ata			39 0024434	
City & State		#, etc.	— · ·		5. Certificate of Status Desired	
28		e			6. Election Campaign Financing	\$5.00 May Re
24 25 29 30 Florida Statutes	23		28		, -	
9, Name and Address of Current Registered Agent HITCHENS, PAUL W ESQUIRE 6464 FIRST AVENUE, NORTH ST PETERSBURG FL 33710 82 Street Address (P.O. Box Number is Not Acceptable) 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 bottly in the State of plorida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the objective section 617,0503, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADD.HONS © IANGES TO OFFICERS AND DRECTORS IN 12 TILE PD DELETE 11. HILE 12. ANDERSON, WILLIAM STREET ADDRESS 112. 70TH ST SOUTH ST. PETERSBURG FL 11. HILE 11. HILE 12. ANDERSON, WILLIAM 13. SIRRET ADDRESS OTHERS SID. ST. PETERSBURG FL 14. CITY-S1-ZIP TILE SD DELETE 21. HILE 21. HILE Change Addition	Zιρ	Country	<u> </u>	<u> </u>		
HITCHENS, PAUL W ESQUIRE 6464 FIRST AVENUE, NORTH ST PETERSBURG FL 33710 82 Street Arkdress (P.O. Box Number is Not Acceptable) 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, out of P. Ip to State of Floricks. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and providing state agent and are the provisions of Section 617 0502. Horida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADD. FIONS OF IANGE'S TO DIFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS 11. PILLE SIGNATE ANDERSON, WILLIAM 12. ANDERSON, WILLIAM 12. ANDERSON, WILLIAM 13. SIREET ADDRESS CITY-S1-ZIP TITLE SO OCHIEFE 14. CITY-S1-ZIP TITLE SO Change Addition	24			30		
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6464 FIRST AVENUE, NORTH ST PETERSBURG FL 33710 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 Ploricki. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept his obtoquious of Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADD. HONS © IANGES TO OFFICERS AND DRICCTORS IN 12 TITLE PD	UITCUE	NO DALK W COOLHDE		of Name		
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64.C1Y-S1-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)(k), 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 cath; 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:

E OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND YPED OR PRINTED NA

813-345-4280