FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT STATE

Sandra B. Morim

Secretary of Str DIVISION OF CORPOTIONS

DOCUMENT #

City & State

SIGNATURE:

INC.				
Principal Place of Business	Mailing Address			
2520 9TH ST N PO BOX 7975 ST. PETERSBURG FL 39734 US	2520 9TH ST N P. O. BOX 7975 ST. PETERSBURG FL 39794 US			
Principal Place of Business The Principal Place of Business	2a. Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			

	Country	L Zip	Cotry
	26	29	30
9.	Name and Address of Co	rrent Registered Ag	ent
_			

City & State

FILED May 05 1998 8:00am Secretary of State

. <u>2184 </u>
. <u>2010 241 241 212 212 212 212 212 212 212 212</u>

7. Is this nonprofit corporation a homeowners association?

8. This corporation owes or has paid the current year Intangible

Yes S No

Yes

4/24/98 9738239800

Applied For

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified 02/01/1984

59-225662

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

4. FEI Number

			61	Name			
BROOK, V. JOHN JR. 2520 9TH ST N			82	Street Address (P.O. Box Number is Not Acceptable)			
	ERSBURG FL 33704		83				
VI. 1 E11	LINDONA I E 00/04			- -		. 85 Zip C	code
			84	City	Fi	L	
Office of r	to the provisions of Sections 617.0502 and 6 egistered agent, or both, in the State of Florion familiar with, and accept the obligations of	as, Such change was a	lulnoriza oy	THE COIP	corporation submits this statement for the purpose poration's board of directors. I hereby accept the ap-	of changing its oppointment as r	registered registered
SIGNATURE .	Signature, typed or printed name of registered agent and title	U analizatio Aport	. Daniel And	es elcontore	required when reinstating) DAYE		
12.	OFFICERS AND DIREC		11 11	att situature	ADDITIONS/CHANGES TO OFFICERS AT	VD DIRECTOR	S IN 12
TITLE	DVP	DELETE	1.171			Change	Addition
NAME	MEDEARIS, CHARLES A		1.MAME]!
STREET ADDRESS	695 CENTRAL AVE. #113		I . ,	ADORESS			};
CITY-ST-ZIP	ST. PETERSBURG FL		1,017-5				
TITLE .	DS	☐ DELETE	2/10 LE	51. En		Change	Addition
NAME	BROOK, V. JOHN JR.		2 NAME				
STREET ADDRESS	139 16TH AVE. NORTH		- I	T ADDRESS			1
	ST. PETERSBURG FL		2 017-				
City-St-Zip Title	DT	DELETE	337TLE	31-ZIF		Change	☐ Addition
NAME	MINCE, MELISSA	C occine	31 NAME				1
	11985 97TH AVE. N.			T ADDRESS			
STREET ADORESS	SEMINOLE FL						
CITY-ST-ZIP	OCHINTOLE I L	DELETE	3A DITY-	21-ZIF		Change	Addition
NAME		beerie	4.1 NAME				Į.
				T ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP FITLE		DELETE	4.4 CITY - 5.1 MILE			☐ Change	Addition
" [5.1 MLE		ļ		ļ
NAME				T ADDRESS			
STREET ADDRESS					Į.		
CITY-ST-ZIP		DELETE	5.4 CITY- 8.1 TITLE			☐ Change	☐ Addition
ITLE		C beccie					ļ
NAME			6.2 NAME	: Et address			
STREET ADORESS							
CITY-ST-ZIP	partify that the information symplicit with this fi	ling does not qualify for	6.4 CITY		ted in Section 119.07(3)(i), Florida Statutes. I further	r certify that the	Information
indicated officer or o Block 12 o	on this annual report or supplemental annual director of the corporation or the receiver or Block 13 if changed, or on an maging many	report is true and accuracy to experience of the control of the co	rate and t execute this	hat my si s report a	gnature shall have the same legal effect as if made is required by Chapter 617, Florida Statutes; and th	under oath; the later my name ap	at I am an pears in