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May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # N04998 (3)

1. Corporation Name

BETTER BUSINESS BUREAU OF WEST FLORIDA, INC.

Principal Place of Business	Mailing Address
5830 142ND AVENUE NORTH STE. B CLEARWATER FL 34620 US	P. O. BOX 7950 P.O. BOX 7950 CLEARWATER FL 34618-7950 US

2. Principal Place of Business 21 5830 142ND AVE N STE B	2a. Mailing Address 26 PO BOX 7950
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 CLEARWATER, FL	City & State 28 CLEARWATER, FL
Zip / Country 24 33760 / 25	Zip / Country 29 33758-7950 / 30

3. Date Incorporated or Qualified: 09/06/1984

4. FEI Number: 59-2453220 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WHITE, PATRICIA S.
5830 142ND AVENUE, NORTH
STE. B
CLEARWATER FL 34620

10. Name and Address of New Registered Agent

81 Name: PATRICIA S. WHITE
82 Street Address (P.O. Box Number is Not Acceptable): 5830 142ND AVE N STE B
83
84 City: CLEARWATER FL 85 Zip Code: 33760

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: Patricia S White 4-30-98
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CD SMITH, REBECCA 5830 142ND AVE N., STE B CLEARWATER FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	VD KAREN NALVEN 5830 142ND AVE N STE B CLEARWATER, FL 33760	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VERNICK, JACK 5830 142ND AVENUE, NORTH, STE. B CLEARWATER FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	SD JIM ALEX 5830 142ND AVE N STE B CLEARWATER, FL 33760	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WHITE, PATRICIA S. 5830 142ND AVENUE, NORTH, STE. B CLEARWATER FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ROBERTS, EMELIE 5830 142ND AVE N., STE B CLEARWATER FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	CD EMELIE ROBERTS 5830 142ND AVE N STE B CLEARWATER, FL 33760	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/97)

14. 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 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: [illegible] 4-30-98 (813) 535-5104