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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N08823

1. Corporation Name

NORTHSIDE PROPERTIES, INC. III

FILED Mar 04, 1999 8:00 am § Secretary of State

03-04-1999 90194 030 ****61.25

Principal Place of Business Mailing Address								
12512 BRUCE B. DOWNS BLVD. 12512 BRUCE B. DOWNS BL TAMPA FL 33612 TAMPA FL 33612				BLVD.				
2. Principal P	lace of Business	<u> </u>	ing Address		<u>.</u>	3. Date Incorporated or Qualifed 04/19/1985		
Suite, Apt.	# atc	26 Suit	e, Apt. #, etc.			4. FEI Number	A	pplied For
–	#, etc.	27	s, Apt. #, 0.0.			59-2551427		ot Applicable
City & Stat	ee .		& State			5. Certificate of Status Desired	\$8.75	Additional
23		28				3. Certificate of Status Desired	Fee R	Required
Zip	Country Zip		Country		6. Election Campaign Financing		May Be	
24	25	29		30		Trust Fund Contribution		to Fees
	9. Name and Address of Cu	urrent Registered	Agent		81 Name	10. Name and Address of New Registered	Våeur	•
AT440 #W	COLUMN W ID							
STANLEY, DONALD W JR. 101 E. KENNEDY BLVD.				82 Street	Address (P.O. Box Number is Not Acceptable)			
SUITE 12					83			
	L 33601-2111			ļ	04 City		85 Zip	Code
				l	84 City	FL	- 1	
office or r	to the provisions of Sections 617 registered agent, or both, in the Sm familiar with, and accept the o	State of Florida, Si	ich change was au	ithorized	by the com	d corporation submits this statement for the purpose o poration's board of directors. I hereby accept the appora-	I changing it intment as r	s registered egistered
SIGNATURE	Signature, typed or printed name of registere	ad posset and title if applic	able /NOTE:	Registered (vient signature	required when reinstating) DATE		
12.		S AND DIRECTO		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
TITLE	PD		☐ DELETE	1.1 1111	E		☐ Change	Addition
NAME	STANLEY, DONALD W., JR			1.2 NA	AE.			
STREET ADDRESS		UITE 1240		1.3 STF	REET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33601-2111		F7	_	Y-ST-ZIP		Change	Addition
TITLE	VD DELETE		2.1 ∏∏			Consula		
NAME	ROSS, ESTELLE	•		2.2 NAJ				-
STREET ADORESS	5206 FAIRWAY ONE DRIVE VALRICO FL 33594	-			REET ADDRESS			1
CITY-ST-ZIP	STD		☐ DELETE	3.1 TITI	Y-ST-ZIP .E		Change	Addition
NAME	WINTON, DOUGLAS		_	3.2 NA	ME.			
STREET ADDRESS	A 100 11 FOTH OT			3.3 STF	REET ADDRESS			Ì
CITY-ST-ZIP	TEMPLE TERRACE FL 336	17		3,4, CII	Y-ST-ZIP			
TITLE	1		☐ DELETE	4.1 TIT	LE		Change	Addition
NAME				4. 2 NA	ME			-
STREET ADDRESS				4.3 ST	REET ADDRESS	6		-
CITY-ST-ZIP			[] DELETE	_	Y-ST-ZIP	<u> </u>	☐ Change	Addition
TITLE			☐ DELETE	5.2 NA		<u></u>	□ cusude	- C Auditori
NAME					VIE REET ADDRESS			
STREET ADDRESS					Y-ST-ZIP			
CITY-ST-ZIP TITLE			☐ DELETE	6.1 TIT			☐ Change	Addition
NAME			_	6.2 NA	ME			}
STREET ADDRESS				6.3 ST	REET ADORESS	5		ł

14. I hereby certify that the information supplied with this flying 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, with all other like empowered. other like empowered Donald W. Stanley Jr., President

SIGNATURE: