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NONPROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block 13 if changed.

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 19 1997 8:00am

Secretary of State

3a. Date of Last Report

09/04/1996

3. Date Incorporated or Qualified

10/29/1985

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

1718 E 7TH AVE. STE. 301

% MARK KELLY

TAMPA FL 33605

N11782

Mailing Address

TAMPA FL 33605-3806

% MARK KELLY 1718 E 7TH AVE. STE. 301

THE 7TH AVENUE BUSINESS CONDOMINIUM OWNERS' ASSO CIATION, INC.

2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business NOT APPLICABLE Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 30 24 25 28 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KELLY, MARK F Street Address (P.O. Box Number is Not Acceptable) 82 1718 E 7TH AVE, STE. 301 83 TAMPA FL 33605 84 City Zip Code 85 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 5 g astire, typed or printed name of registered agent and little f applicable DATE (NOTE: Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) OFFICERS AND DIRECTORS 12 13. Addition DELETE 1.1 TITLE ☐ Change PD TITLE GUYTON, BARBARA 1.2 NAME NAME 1726 E 7TH AVE. 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition **TSD** DELETE 2.1 TITLE TELLE KELLY, MARK F 22 NAME NAME 1718 E 7TH AVE STE 301 2.3 STREET ADDRESS STREET ADDRESS TAMPA FL 2 4 CHTY-ST-ZIP CHY-ST-ZIP Change Addition DELETE TITLE 3.1 TITLE MCKEE, ROBERT 3.2 NAME NAME 1718 E 7TH AVE, STE. 301 3.3 STREET ADDRESS STREET ADDRESS TAMPA FL 3.4. CITY-ST-ZIP CHTY-ST-ZIP Addition DELETE 4.1 TITLE TITLE GUYTON, ROBERT 4. 2 NAME NAME 1726 E 7TH AVE. 4.3 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-S1-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE ROBERT SAITTA 1728 E 7th. Avg. 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS TAMPA, FL 54 CiTY-ST-ZIP CHY-ST-7/P DELETE 61 TITLE Change Addition TITLE 62 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filling 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 office 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

FED NAME OF SIGNING OFFICER OR DIRECTOR

The Cold Haller