## FILE NOW: FILING FEE IS \$61.25

## NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIO

1998

N12075

CRANADA DI ACE COMPONINI INI ACCOCIATIONI CE TANDA

INC.									
Principal Place of Business Malling Address					***************************************	- I (BO)(SID) OD) SIDIR (IO) OD) H ISODI:	ANI SIBIL BIB	ili albil <b>asa</b> li bil	
C/O CAROLINE 3304-B WEST ( TAMPA FL 336 US	GRANADA	C/O CAROLINE L. CRISLIP 3301-B WEST GRANADA TAMPA FL 33829 US			3. Date incorporated or Qualified  11/14/1985  4. FEI Number  Applied For				
00		00				59-2868339		<del></del>	t Applicable
2. Principal Place of Business 21 Suite, Apt. #, etc.		28. Mailing Address 26 Suite, Apt. #, etc. 27		Certificate of Status Desired					
				Election Campaign Financing     Trust Fund Contribution		\$5.00 I Added to			
City & Stat	e	City & State				7. Is this nonprofit corporation a h		rs association	n?
Zip 24	Country 25	Zip 29	30	untr	/	8. This corporation owes or has per Personal Property Tax due June			angible No
	9. Name and Address of Curr	ent Registered Agent		Τ.		10. Name and Address of New Re	gistered	Agent	
				81	Name				
CRISUP, CAROLINE L. 3304-B WEST GRANADA ST				82	Street Addr	ess (P.O. Box Number is Not Accepta	ble)	-	
TAMPA FL 33629				83					
•				84	City		<del></del>	85 Zip (	Code
				1	'		FL	.   -	
SIGNATURE	Signature, typed or printed name of registered a	gent and little If applicable. (	(NOTE: Register	ed Ag		coration submits this statement for the ion's board of directors. I hereby acce and when rehalating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND		
TITLE	PD	☐ DELETE		TITLE				☐ Change	Addition
NAME	SHERMAN, ROCHELLE		1.21	NAME	l l				
STREET ADDRESS	3304-A WEST GRANADA ST		1.3	STREET	T ADDRESS				
CITY-ST-ZIP	TAMPA FL	——————————————————————————————————————			ST-ZIP			77.0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE	VO	DELETE	1	TITLE				☐ Change	Addition
NAME	MOKITOHEN, KATHY	•	I	NAME					
STREET ADDRESS	<del>9304-A West Granada st</del> <del>Tampa Fl</del>				TADORESS				
CITY-ST-ZIP TITLE	STD	☐ DELETE		CITY-: TITLE	ST-ZIP			Change	☐ Addition
NAME	CRISLIP, CAROLINE			NAME				C CHRING	
STREET ADDRESS	3304-B WEST GRANADA ST				ADDRESS				
CITY-ST-ZIP	TAMPA FL		1		ST-ZIP	•			
TITLE	VD	DELETE		TITLE	21-4H		<del></del>	Change	Addition
NAME	MEREDITH TUPLER		1	NAME	Ì				
STREET ADORESS	3304-A WEST GRAN	rda st			T ADDRESS				
CITY-ST-ZIP	TAMPA PL 336	29 ~			ST-ZIP				
TOLE		DELETE		TITLE				Change	Addition

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY ST-ZIP

☐ DELETE

Change

■ Addition

**FILED** 

Apr 15 1998 8:00am

Secretary of State