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05-04-1999 90139 029 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N16808

1. Corporation Name
ZONTA CLUB OF TAMPA I, INC.

481716 - 90139 - 29

Principal Place of Business	Mailing Address
16101 SEXTON COURT TAMPA FL 33647-1901 US	16101 SEXTON COURT TAMPA FL 33647-1901 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21 18127 REGENTS SQUARE DR.	26 18127 REGENTS SQUARE DR	09/16/1986
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 59-6173107 ☐ Applied For ☐ Not Applicable
23 City & State TAMPA, FLORIDA	28 City & State TAMPA, FLORIDA	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
24 Zip 33647 25 Country USA	29 Zip 33647 30 Country USA	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CRUMPTON, AMY 16101 SEXTON COURT TAMPA FL 33647-1901	81 Name CRUMPTON AMY 82 Street Address (P.O. Box Number is Not Acceptable) 18127 REGENTS SQUARE DRIVE 83 84 City TAMPA FL 85 Zip Code 33647

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 Amy B Crumpton DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☒ DELETE	1.1 TITLE	PRESIDENT	☐ Change ☐ Addition
NAME	MAYES, LEATIS		1.2 NAME	VARGAS, HORTENSA	
STREET ADDRESS	511 E ADALEE ST		1.3 STREET ADDRESS	5028 SAN MIGUEL ST	
CITY-ST-ZIP	TAMPA FL 33603		1.4 CITY-ST-ZIP	TAMPA, FL 33629	
TITLE	V	☐ DELETE	2.1 TITLE	VICE PRESIDENT	☐ Change ☐ Addition
NAME	VARGAS, HORTENSA		2.2 NAME	FERNANDEZ, JOYCE	
STREET ADDRESS	5028 SAN MIQUEL ST		2.3 STREET ADDRESS	3624 BERGER ROAD	
CITY-ST-ZIP	TAMPA FL 33629		2.4 CITY-ST-ZIP	LUTZ, FL 33549	
TITLE	RS	☒ DELETE	3.1 TITLE	RECORDING SECRETARY	☐ Change ☐ Addition
NAME	POWERS, RUTH		3.2 NAME	KATHLEEN BELMONTE	
STREET ADDRESS	7007 S WALL ST		3.3 STREET ADDRESS	310 1/2 N LAUBER WAY	
CITY-ST-ZIP	TAMPA FL 33616		3.4 CITY-ST-ZIP	TAMPA, FL 33609	
TITLE	T	☐ DELETE	4.1 TITLE	TREASURER	☐ Change ☐ Addition
NAME	CRUMPTON, AMY		4.2 NAME		
STREET ADDRESS	16101 SEXTON CT		4.3 STREET ADDRESS	→ SAME	
CITY-ST-ZIP	TAMPA FL 33647		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE	~~DIRECTOR~~ DIRECTOR	☐ Change ☐ Addition
NAME	FERNANDEZ, JOYCE		5.2 NAME	MARY KATHERINE ACHORN	
STREET ADDRESS	3624 BERGER ROAD		5.3 STREET ADDRESS	P.O. BOX 31356	
CITY-ST-ZIP	LUTZ FL 33549		5.4 CITY-ST-ZIP	TAMPA, FL 33631	
TITLE	D	☒ DELETE	6.1 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	LUCAS, JOYCE		6.2 NAME	LINDA SNYDER	
STREET ADDRESS	3212 ARCH STREET		6.3 STREET ADDRESS	201 W. LAUREL ST ~~#Unit~~ #601	
CITY-ST-ZIP	TAMPA FL 33607		6.4 CITY-ST-ZIP	TAMPA, FL 33602	

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, with all other like empowered.

SIGNATURE: Amy B Crumpton SIGNATURE REQUIRED 813-248-8150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)