FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jul 09 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

DOCUMENT # N17534 (1)					
INTERNATIONAL SELF-HELP, INC.					
	•				
Principal Place of Business Mailing Address				T I ORDINGE OUT FROM NOOM BRIDE BRIDE BRIDE BRIDE OF BRIDE ON AND BUILT BROWN DIGHT BROWN BROWN	
4926 COQUINA KEY DRIVE. S.E. 4926 COQUINA KEY DRIVE.			S.E.		3. Date Incorporated or Qualified
ST. PETERSBUR	RG FL 33705	ST. PETERSBURG FL 33705 US			10/27/1986
03		03			4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Addre					59-2782418 Not Applicable
21	-	28	¬		5. Certificate of Status Desired S8.75 Additional Fee Required
J Suite, Apt.	#, etc.	Suite, Apt. #, etc.	 - 		6. Election Campaign Financing \$5.00 May Be
22 City & State		City & State			Trust Fund Contribution Added to Fees
⊢ , '		28			7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Country	7	8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curren		30		Personal Property Tax due June 30. Yes XNo XA 10. Name and Address of New Registered Agent
			81	Name	
DEGROOT, DUDLEY E. 82 Street Add				ddress (P.O. Box Number is Not Acceptable)	
4275 - 34TH STREET, SOUTH, SUITE #148					
ST. PETERSBURG FL 33711			83	<u> </u>	
	•		84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's both					orporation submits this statement for the purpose of changing its registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 617.0503, Flor	rida Statute	s.	ration's board of directors. Thereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE	Registered An	ent signature rer	quired when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	DEGROOT, DUDLEY E.		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY - 5	ST-ZIP	Co Classic
TITLE	VD DELETE		2.1 TITLE		Change
NAME STREET ADDRESS	REAMS, HUGH E., JR 2910 COLFAX STREET		2.2 NAME		
CITY-ST-ZIP		MILLIOTON II		ADDRESS CT. 740	
TITLE	SID	DELETE	2. 4 City-St-ZiP 3.1 Title		Change Addition
NAME	DEGROOT, DAVID G.		3.2 NAME		
STREET ADDRESS	ROUTE 2, 176-E		3.3 STREE	ADDRESS	
CITY-ST-ZIP	ROBBINSVILLE, NC.		3.4. CITY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS				ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP DELETE 5.1 TITLE		ST-ZIP	Change Addition
TITLE NAME	T. DEFELS		5.1 TITLE 5.2 NAME		Charge C Auditoli
STREET ADDRESS				ADDRESS	
CITY-ST-ZIP			5.4 CITY - S		
TITLE		☐ DELETE	6.1 TITLE	. 411	☐ Change ☐ Addition
NAMÉ			6.2 NAME		-
STREET ADDRESS			6.3 STREE	ADDRESS	

CITY-ST-ZIP 6.4 CITY - ST - ZIP 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.