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Jun 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northcutt Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N17587** (9)

1. Corporation Name

ST. PETERSBURG FIRE FIGHTERS ASSOCIATION, INC.



Principal Place of Business	Mailing Address
PRESIDENT 5240 1ST AVE NO ST. PETERSBURG FL 33710 US	PRESIDENT 5240 1ST AVE N ST. PETERSBURG FL 33710-8104 US

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 10/29/1986	3a. Date of Last Report 01/26/1996
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4. FEI Number 59-2743167	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	
FEINBERG, RICHARD R 5240 1ST AVE N ST. PETERSBURG FL 33710	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
FL	

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 *Richard R. Feinberg* **RICHARD R. FEINBERG** **4-24-97**
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	VD ☒ DELETE
NAME	MOORE, MICHAEL J
STREET ADDRESS	9487 128TH AVE. N
CITY-ST-ZIP	LARGO FL
TITLE	STD ☐ DELETE
NAME	BLANK, MICHAEL T
STREET ADDRESS	5717 20TH AVENUE SOUTH
CITY-ST-ZIP	ST. PETERSBURG, FL
TITLE	PD ☐ DELETE
NAME	FEINBERG, RICHARD R
STREET ADDRESS	P.O. BOX 11384
CITY-ST-ZIP	ST. PETERSBURG FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	VD ☐ Change ☒ Addition
1.2 NAME	LOW, ROBERT G.
1.3 STREET ADDRESS	13991 BERMUDA DRIVE
1.4 CITY-ST-ZIP	SEMINOLE FL. 33776
2.1 TITLE	STD ☐ Change ☐ Addition
2.2 NAME	MICHAEL T. BLANK
2.3 STREET ADDRESS	5717 20 AVE. SO
2.4 CITY-ST-ZIP	ST. PETERSBURG FL 33707
3.1 TITLE	PD ☒ Change ☐ Addition
3.2 NAME	RICHARD R. FEINBERG
3.3 STREET ADDRESS	546 MAGGIORE BLVD., So.
3.4 CITY-ST-ZIP	ST. PETERSBURG FL. 33705
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 (changed) or on an attachment with an address.

SIGNATURE *Richard R. Feinberg* **RICHARD R. FEINBERG** **8/2-27-97**

CR2E037 (9/96)