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Apr 10 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N20979** (3)

1. Corporation Name

**THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER
ST. PETERSBURG, FLORIDA, INC.**

Principal Place of Business

Mailing Address

C/O JOHN C. CANNON
116 5TH ST. SOUTH
ST. PETERSBURG FL 33701-2010

C/O JOHN C. CANNON
116 5TH ST. SOUTH
ST. PETERSBURG FL 33701-4112



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
06/04/1987

3a. Date of Last Report
05/21/1996

4. FEI Number
59-0624468

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**CANNON, JOHN C.
116 FIFTH AVENUE SOUTH
ST. PETERSBURG FL 33701**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **DC**
STREET ADDRESS **MCQUEEN, WILLIAM**
CITY-ST-ZIP **121 BAY POINT DRIVE**
ST. PETERSBURG FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **DVC**
STREET ADDRESS **KNOWLES, BARBARA**
CITY-ST-ZIP **918 MYAKKA CT NE**
ST PETERSBURG FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **DT**
STREET ADDRESS **PICKERING, ALAN**
CITY-ST-ZIP **620 GRAN KAMEN WAY**
APOLLO BCH., FL 33572

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **DS**
STREET ADDRESS **OESCHER, JANE**
CITY-ST-ZIP **7037 SUNSET DR. S. #306**
S. PASADENA FL 33707

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **DP**
STREET ADDRESS **CANNON, JOHN C.**
CITY-ST-ZIP **1381 48TH AVE NE**
ST. PETERSBURG FL

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
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 if changed, or on an attachment with an address.

SIGNATURE

John C. Cannon, President

3/27/97

8/12/99-9/12

CR2E037 (9/96)