FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 23 PM 1:06

DOCUMENT # **N21870** (3)

1. Corporation Name

TAMPA BAY BLACK BUSINESS INITIATIVE FUND, INC.

Principal Place of Business	Mailing Address
315 E KENNEDY BLVD TAMPA FL 33602 US	315 E KENNEDY BLVD TAMPA FL 33602 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/04/1987
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2849317 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 4825 W. Kennedy Blvd.	26 4825 W. Kennedy Blvd.
Suite, Apt. #, etc. 22 1st Floor	Suite, Apt. #, etc. 27 1st Floor
City & State 23 Tampa, Florida	City & State 28 Tampa, Florida
Zip / Country 24 33609 25 Hillsborough	Zip / Country 29 33609 30 Hillsborough

9. Name and Address of Current Registered Agent

ANDERSON, WALLACE B.
BARNETT PLAZA, SUITE 1240
101 E. KENNEDY BLVD.
TAMPA FL 33601

10. Name and Address of New Registered Agent

81 Name: Kasten, A. C II
82 Street Address (P.O. Box Number is Not Acceptable): Barnett Plaza, Suite 1240
83 101 E. Kennedy Blvd.
84 City: Tampa, FL FL 85 Zip Code: 33602

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: A. Kasten, II Exec 4/28/95
(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	D	11 TITLE		☐ Change ☐ Addition
NAME	LEFLER, LESTER	12 NAME		
STREET ADDRESS	702 N FRANKLIN ST	13 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL	14 CITY-ST-ZIP		
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	WELCH, DAVID	22 NAME		
STREET ADDRESS	901 34TH STREET., SOUTH	23 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL	24 CITY-ST-ZIP		
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	HAMILTON, THOMAS	32 NAME		
STREET ADDRESS	33 6TH STREET, SOUTH	33 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☑ Change ☐ Addition
NAME	PETERSON, RON	42 NAME	100 S. Ashley Street	Address
STREET ADDRESS	1 DAVIS ISLAND	43 STREET ADDRESS	Suite 4002	
CITY-ST-ZIP	TAMPA FL	44 CITY-ST-ZIP	Tampa, FL 33602	
TITLE	D	51 TITLE	S	☑ Change ☐ Addition
NAME	KINNEY, ROBERT	52 NAME	John Moore	
STREET ADDRESS	1150 CLEVELAND STREET	53 STREET ADDRESS	AmSouth Bank, P. O. Box 6100	
CITY-ST-ZIP	CLEARWATER FL	54 CITY-ST-ZIP	Clearwater, FL 34618	
TITLE	P	61 TITLE	P	☑ Change ☐ Addition
NAME	CHRISTIAN, DAVID A	62 NAME	Frances Townsend	
STREET ADDRESS	315 E. KENNEDY BLVD.	63 STREET ADDRESS	4825 W. Kennedy Blvd., 1st Floor	
CITY-ST-ZIP	TAMPA FL	64 CITY-ST-ZIP	Tampa, FL 33609	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Frances H. Townsend 4/28/95 813/282-2912
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0014084