


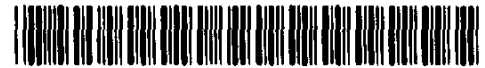
FILE NOW: FILING FEE IS \$61.25

FILED
Jul 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N24457** (6)

1. Corporation Name
TAMPA BAY JUNIOR LIGHTNING INC.



Principal Place of Business P.O. BOX 24632 TAMPA FL 33623-4632		Mailing Address P.O. BOX 24632 TAMPA FL 33623-4632		3. Date Incorporated or Qualified 01/22/1988
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 59-2846283
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
City & State 23		City & State 28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No				

9. Name and Address of Current Registered Agent WASILEWSKI, RICHARD 13940 ICOT BLVD RUBIN ICOT CENTER CLEARWATER FL 34620		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LETONG, EDGAR	1.2 NAME	Donna Schurz
STREET ADDRESS	1097 38TH AVE	1.3 STREET ADDRESS	419 55th Ave
CITY-ST-ZIP	ST PETERSBURG FL	1.4 CITY-ST-ZIP	St. Pete Beach, FL 33706
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAGLEY, TOM	2.2 NAME	Renee Fuchong
STREET ADDRESS	2130 CHERRY ST NE	2.3 STREET ADDRESS	534 20th Ave
CITY-ST-ZIP	ST PETERSBURG FL	2.4 CITY-ST-ZIP	Indian Rocks Bld 33785
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Secretary
NAME	HOLLOWAY, STANLEY J	3.2 NAME	George W. Leach
STREET ADDRESS	211 CHIPPEWA AVE	3.3 STREET ADDRESS	8140 Canterbury Circle N
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	Largo, FL 33707-3041
TITLE	TD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	Treasurer
NAME	TAGUE, SHELLY	4.2 NAME	Chip Hamlett
STREET ADDRESS	612 OVERHILL DR	4.3 STREET ADDRESS	311 50th Ave NE
CITY-ST-ZIP	BRANDON FL	4.4 CITY-ST-ZIP	St Pete FL 33702
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET 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.

SIGNATURE:  7/8/98

CR2E037 (1097)