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Feb 12 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 # **N29048** (8)

1. Corporation Name

TAMPA UNION STATION PRESERVATION & REDEVELOPMENT, INC.

Principal Place of Business

Mailing Address

**4603 WISHART BLVD
TAMPA FL 33603
US**

**4603 WISHART BLVD
TAMPA FL 33603
US**

3. Date Incorporated or Qualified

10/28/1988

4. FEI Number

59-6001874

Applied For

Not Applicable

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

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. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHEPHARD, W. JAMES
5102 N. BRANCH AVE.
TAMPA FL 33603**

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

**D
NAME
HERRON, JIM
STREET ADDRESS
2016 N. VILLAGE AVE
CITY-ST-ZIP
TAMPA FL**

1.1 TITLE ☐ Change ☐ Addition

**1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP**

TITLE ☐ DELETE

**D
NAME
MCQUIGG, JOHN
STREET ADDRESS
1000 W. HORATIO #125
CITY-ST-ZIP
TAMPA FL**

2.1 TITLE ☐ Change ☐ Addition

**2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP**

TITLE ☐ DELETE

**D
NAME
JENNEWAIN, JOAN
STREET ADDRESS
4710 CLEAR AVE
CITY-ST-ZIP
TAMPA FL**

3.1 TITLE ☐ Change ☐ Addition

**3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP**

TITLE ☐ DELETE

**D
NAME
ENGLISH, MICHAEL M.
STREET ADDRESS
1916 AVENIDA REPUBLICA DE CUBA
CITY-ST-ZIP
TAMPA FL**

4.1 TITLE ☐ Change ☐ Addition

**4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP**

TITLE ☐ DELETE

**DTS
NAME
KRUSE, FRANCES
STREET ADDRESS
16601 HUTCHINSON RD
CITY-ST-ZIP
TAMPA FL**

5.1 TITLE ☐ Change ☐ Addition

**5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP**

TITLE ☐ DELETE

**D
NAME
PLYLER, HARRIET
STREET ADDRESS
800 S WILLOW AVE
CITY-ST-ZIP
TAMPA FL**

6.1 TITLE ☐ Change ☐ Addition

**6.2 NAME
6.3 STREET ADDRESS
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 in an attachment with an address.

SIGNATURE:

[Signature]

FEB 6, 1998 812-238-1542

CR2E037 (10/97)