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Apr 02 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 # N30755 (5)

1. Corporation Name

THE DOWNTOWN CORPS, INC.



Principal Place of Business

Mailing Address

P BOX 2387
SUITE 600
TAMPA FL 33601
US

P O BOX 2387
SUITE 600
TAMPA FL 33601-2387
US

3. Date Incorporated or Qualified
02/17/1989

3a. Date of Last Report
05/10/1996

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

4. FEI Number

59-2976396

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RAMIREZ, JULIO C JR
SUNTRUST BANK TAMPA BAY
401 E. JACKSON ST.
TAMPA FL 33601**

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 DVT ☐ DELETE
NAME RAMIREZ, JULIO C JR
STREET ADDRESS 401 E. JACKSON ST
CITY-ST-ZIP TAMPA FL 33601

TITLE DV ☒ DELETE
NAME SAPP, STEPHANIE
STREET ADDRESS 2025 E. 7TH AVE.
CITY-ST-ZIP TAMPA FL 33605

TITLE DV ☒ DELETE
NAME WALTER, JIM
STREET ADDRESS 2227 SHADEHILL COURT
CITY-ST-ZIP TAMPA FL 33602

TITLE DV ☐ DELETE
NAME ZIEGLER, FRANCES
STREET ADDRESS 518 N. TAMPA ST., SUITE 300
CITY-ST-ZIP TAMPA FL 33602

TITLE PD ☐ DELETE
NAME CHALFANT, MARSHA
STREET ADDRESS 100 S ASHLEY DRIVE, SUITE 1650
CITY-ST-ZIP TAMPA FL

TITLE DS ☐ DELETE
NAME FUEYO, RICHARD K
STREET ADDRESS 220 S. FRANKLIN ST.
CITY-ST-ZIP TAMPA FL 33602

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

PD ☐ Change ☒ Addition
THOMAS, SUSAN
100 S. ASHLEY DRIVE, STE 1650
TAMPA, FL 33602

DV ☐ Change ☒ Addition
WARTH, DONALD
8305 W. RIVERCHASE DR.
TEMPLE TERRACE, FL 33607

☐ Change ☐ Addition

D ☒ Change ☐ Addition
CHALFANT, MARSHA
100 S. ASHLEY DRIVE, STE 1650
TAMPA FL 33602

☐ Change ☐ Addition

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.

CR2E037 (9/96)