## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

# **DOCUMENT # N31344**

1. Corporation Name

### HILLSBOROUGH COUNTY LAW LIBRARY FOUNDATION, INC.

Principal Place of Business

Mailing Address

725 E. KENNEDY BLVD. **TAMPA FL 33602** 

725 E. KENNEDY BLVD. TAMPA FL 33602

# Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90127 014 \*\*\*\*61.25

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2. Principal Place of Business   2a   Mailing Address   2a   Suite, Apt. 4, etc.   27   Suite, Apt. 4, etc.   27   Suite, Apt. 4, etc.   4. Fee Number   Applied For   Sy2330250   5. Centrate of Status Desired   \$8.75 Additional Fee Nectical   Applied For   Sy2330250   5. Centrate of Status Desired   \$8.75 Additional Fee Nectical   \$8.7						11 <b>0</b> 1 <b>6</b> 1011 01011	<b>                                     </b>	)   <b>4</b> 101  <b>1</b> 30
Sulle, Apt. 6, etc.    Sulle, Apt. 6, etc.		<u> </u>	Mailing Address		4			
27 City & State 28 City & State 29 City & State 29 Country 30 Country 40 Country 40 Country 41 City & State 41 Name 42 Street Address of New Registered Agent 42 Street Address of New Registered Agent 43 Name and Address of Current Registered Agent 44 City 45 City & State 45 City & State 46 City 47 City & State 47 City & State 48 City 48 City 49 City 40 City 41							- Ar	ndied For
City & State  28]	•			1 -			<del></del> -	
28   29   20   20   20   30   30   30   30   30			<del></del>				<del></del>	
Zip   Country   Zip   Country   S. Belletine Campaign Financing   \$5.00 May 8b   Addition   Added to Fees   S. Name and Address of Current Registered Agent   Street Address (P.O. Box Number is Not Acceptable)	·	<b>⊢</b> '			5. Certifcate of Status Desired	L	• -	~.
9. Name and Address of Current Registered Agent  81 Name  WISE, NORMA J  725 E KENNEDY BLVD  TAMPA FL 35802  11. Pursuant to the provisions of Sections 817,0502 and 817,1508, Florida Statutes, the above agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of director's. I hereby accept the appointment as registered agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above agent, and applications of Section 617,6503, Florida Statutes, the above a			Country		6. Election Campaign Financing		\$5.00	May Be
9. Name and Address of Current Registered Agent    10. Name and Address of New Registered Agent		_ <del>                                    </del>	0		· ·	L	•	
WISE, NORMA J 725 E KENNEDY BLVD TAMPA FL 33602  82 Street Address (P.O. Box Number is Not Acceptable)  83 B4 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SID				10. Name and Address of New R	egistered A	\gent		
725 E. KENNEDY BLVD TAMPA PL 33602  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Floridia. Studtues, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the polipidations of, Section 617.0503, Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the polipidations of, Section 617.0503, Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the polipidation of, Section 617.0503, Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the polipidation of, Section 617.0503, Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with an except the appointment as registered agent. I am familiar with a statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I all the purpose of changing its registered agent. I all the purpose of changing its registered agent. In			81	Name				
725 E. KENNEDY BLVD TAMPA PL 33602  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Floridia. Studtues, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the polipidations of, Section 617.0503, Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the polipidations of, Section 617.0503, Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the polipidation of, Section 617.0503, Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the polipidation of, Section 617.0503, Floridia Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with an except the appointment as registered agent. I am familiar with a statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I all the purpose of changing its registered agent. I all the purpose of changing its registered agent. In	WICE NODMA I		92	Stroot Add	ress (P.O. Box Number is Not Accenta	hle)		
TAMPA FL 33602  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 agent, I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept they obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGN	l .:		02	Stieet Audi	ress (F.O. DOX Humber is Not Accepta	DIG)		
### City FL   85 Zip Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes and open composition submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such changing was authorized by the corporation's board of directors. I hereby accept the appointment as registered organic and accept the purpose of changing its registered of the corporation submits this statement for the purpose of changing its registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the purpose of changing its registered of directors. I have a purpose of changing its registered of directors. I have a purpose of changing its registered of directors. I have a purpose of changing its registered of directors. I have a purpose of changing its registered of directors. I have			83					
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office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of girector's. I nereby accept the appointment as fregistered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of girector's. I nereby accept the appointment as fregistered agent, and accept the policylations of Section 617 (503). Florida Statute's.  SIGNATURE    CAMPA			84	City		FL	182 Zib	Code
office or registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of girector's. I nereby accept the appointment as fregistered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of girector's. I nereby accept the appointment as fregistered agent, and accept the policylations of Section 617 (503). Florida Statute's.  SIGNATURE    CAMPA	11. Pursuant to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes	, the above	e-named com	poration submits this statement for the	purpose of	changing its	registered
SIGNATURE   Sign	office or registered agent, or both, in the State	of Florida. Such change was aut	honzed by	the corporation	on's board of directors. I hereby accep	t the appoin	tment as re	gistered
Suprimush, typed or primate margin of Registrates   (NOTE: Respitated Agent is applicated Agent is applicated Agent is applicated.)   Time	$U_{n} = U_{n} = U_{n} = U_{n}$	uona or, oeduon o i r.oada, Fiond	Oldidios			4/2	2199	
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NAME   STREET ADDRESS   TAMPA FL			13.		ADDITIONS/CHANGES TO OFF	ICERS AN		RS IN 12
STREET ADDRESS   TAMPA FL	TITLE SD	☐ DELETE	1.1 TITLE				Change	Addition !
STREET ADDRESS   TAMPA FL	NAME WISE, NORMA J		1.2 NAME	1				
TAMPA FL	I		1.3 STREET	ADDRESS				
TITLE	•		1.4 C/TY-S	r-zip				
THEODORE, GUILENE   22 NAME   23 STREET ADDRESS   2 CITY-ST-ZIP   TAMPA FL   2 CITY-ST-ZIP   TAMPA FL   33 STREET ADDRESS   2 CITY-ST-ZIP   TAMPA FL   34 CITY-ST-ZIP   34 CITY-ST-ZIP   Change   Addition   Ad		☐ DELETE	2.1 TITLE				☐ Change	Addition
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NAME   GRAZIANO, DOMINICK   3.2 NAME   3.3 STREET ADDRESS   201 E. KENNEDY BLVD., SUITE 1125   3.4 CITY-ST-ZIP   TAMPA FL   3.4 CITY-ST-ZIP   4.1 TITLE   Change   Addition		☐ DELETE					☐ Change	Addition
STREET ADDRESS   201 E. KENNEDY BLVD., SUITE 1125   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   TAMPA FL   3.4 CITY-ST-ZIP		<del></del> ,	3.2 NAME					
TITLE   D		1125	3.3 STREET	ADDRESS				
TITLE D DELETE 4.1 TITLE Change Addition  NAME FICARROTTA, GASPER J 4.2 NAME  STREET ADDRESS 419 PIERCE ST. 4.3 STREET ADDRESS  CITY-ST-ZIP TAMPA FL 5.1 TITLE  TD DELETE 5.1 TITLE  STREET ADDRESS CITY-ST-ZIP  TAMPA FL 5.2 NAME  STREET ADDRESS CITY-ST-ZIP  TAMPA FL 5.3 STREET ADDRESS  CITY-ST-ZIP  TAMPA FL 5.4 CITY-ST-ZIP  TAMPA FL 5.4 CITY-ST-ZIP  TAMPA FL 6.1 TITLE  CD DELETE 6.1 TITLE  CD Change Addition  Change Change Change  CHANGE  CITY-ST-ZIP  TAMPA FL CD Change Change  CHANGE  CAS STREET ADDRESS  CITY-ST-ZIP  CHANGE  CAS STREET ADDRESS  CITY-ST-ZIP  CHANGE  CHA		· · ·	3.4. CITY-S	T-ZIP				
NAME FICARROTTA, GASPER J  STREET ADDRESS 419 PIERCE ST.  CITY-ST-ZIP TAMPA FL  10 DELETE 51 TITLE TD  GREIWE, THOMAS H.  STREET ADDRESS CITY-ST-ZIP  TAMPA FL  52 NAME 53 STREET ADDRESS CITY-ST-ZIP  TAMPA FL  CD  DELETE 61 TITLE CD  CHange Change Addition Change		☐ DELETE	4.1 TITLE				Change	☐ Addition
STREET ADDRESS 419 PIERCE \$T.  CITY-ST-ZIP TAMPA FL  TD  NAME GREIWE, THOMAS H.  STREET ADDRESS CITY-ST-ZIP TAMPA FL  CD  NAME KELLAHER, SANDRA M STREET ADDRESS 2130 W. BRANDON BLVD., SUITE 204  4.4 CITY-ST-ZIP 4.4 CITY-ST-ZIP 5.1 TITLE 5.1 TITLE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 STREET ADDRESS	i		4. 2 NAME					
TAMPA FL			4.3 STREET	ADDRESS				
TITLE TD DELETE 5.1 TITLE 5.2 NAME  STREET ADDRESS CITY-ST-ZIP TAMPA FL 5.4 CITY-ST-ZIP  TITLE CD DELETE 6.1 TITLE 6.2 NAME  STREET ADDRESS 6.3 ST	1		4.4 CITY-S	T-ZIP				
NAME GREWE, THOMAS H.  STREET ADDRESS CITY-ST-ZIP TAMPA FL  CD DELETE CD NAME KELLAHER, SANDRA M STREET ADDRESS STREET ADDRESS STREET ADDRESS 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS		☐ DELETE					☐ Change	☐ Addition
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CITY-ST-ZIP TAMPA FL 5.4 CITY-ST-ZIP  TITLE CD 6.1 TITLE 6.2 NAME  KELLAHER, SANDRA M  STREET ADDRESS 2130 W. BRANDON BLVD., SUITE 204  5.4 CITY-ST-ZIP  6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	l	110	5.3 STREET	ADDRESS				
TITLE CD DELETE 6.1 TITLE Change Addition  NAME KELLAHER, SANDRA M  STREET ADDRESS 2130 W. BRANDON BLVD., SUITE 204  6.3 STREET ADDRESS	l		5.4 CITY - S	r-ZIP				
NAME KELLAHER, SANDRA M STREET ADDRESS 2130 W. BRANDON BLVD., SUITE 204  62 NAME 63 STREET ADDRESS		☐ DELETE	6.1 TITLE				Change	☐ Addition
STREET ADDRESS 2130 W. BRANDON BLVD., SUITE 204 6.3 STREET ADDRESS	1		6.2 NAME					
	TOTAL STATE OF THE	TF 204	6.3 STREET	ADDRESS				
	CITY-ST-ZIP BRANDON FL	1L 607	6.4 CITY-S	T-ZIP				

BRANDON FL 14. Thereby 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, with all other like empowered.

**SIGNATURE:** 

REMOKENTED WISE