

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N32809** (8)
1. Corporation Name
BAY AREA HEARTS OF GOLD, INC.



Principal Place of Business
**P.O. BOX 10247
ST. PETERSBURG FL 33733**

Mailing Address
**P.O. BOX 10247
ST. PETERSBURG FL 33733**

3. Date Incorporated or Qualified
06/13/1989

3a. Date of Last Report
07/07/1995

4. FEI Number
59-2939389

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

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**YOUNG, VERNELL
4327 14TH AVENUE S
ST. PETE FL 33711**

10. Name and Address of New Registered Agent

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

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	SHERROD, EULA	600 NEWTON AVE., SOUTH	ST. PETERSBURG FL	<input checked="" type="checkbox"/>
VD	CONAGE, ALFRED	4327 14TH AVENUE S	ST. PETE FL	<input type="checkbox"/>
SD	YOUNG, VERNELL	4327 14TH AVENUE S	ST. PETE FL	<input type="checkbox"/>
TD	BALWIN, ROSA	3437 17TH AVE. S.	ST. PETERSBURG FL	<input checked="" type="checkbox"/>
FCD	WITCHARD, HENRIETTA	2435 3RD AVENUE S	ST. PETE FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
PRESIDENT	ALFRED CONAGE	4327 14TH AVE SO	ST PETE FL 33711	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VICE PRESIDENT	ROBERT VINSON	1028 ALHAMBRA WAY SO	ST PETE FL 33705	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TD	WANZA VINSON	1028 ALHAMBRA WAY SO	ST PETE FL 33705	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
FCD	Antoinette Thompson	4955 37th St. No Apt. 1	ST PETE FL 33714	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vernell Young

Date

Daytime Phone #

0012688

CR2E037 (3/96)