


FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Jun 10, 1999 8:00 am**  
**Secretary of State**

06-10-1999 90016 007 \*\*\*\*61.25

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NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		 FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # N33710</b>			
1. Corporation Name <b>CHRISTMAS TOY SHOP PROJECT, INC.</b>			
Principal Place of Business 550 16TH STREET NORTH ST. PETERSBURG FL 33705		Mailing Address 550 16TH STREET NORTH ST. PETERSBURG FL 33705	



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	08/14/1989
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	59-0970736
City & State	City & State	Applied For
23	28	Not Applicable
Zip	Country	5. Certificate of Status Desired
24	25	29
30	30	<input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution
		<input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent <b>BOYDSTUN, C. BRYANT, JR.</b> <b>2600 NINTH STREET NORTH</b> <b>ST. PETERSBURG FL 33704</b>				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 \_\_\_\_\_ DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	1ST VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUTLAND, ARDITH	1.2 NAME	
STREET ADDRESS	1281 SNELL ISLAND BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL 33703	1.4 CITY-ST-ZIP	
TITLE	AST <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NADEAN JENSEN	2.2 NAME	
STREET ADDRESS	4322 22ND AVE. NO.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS E. MCLEAN, SR.	3.2 NAME	
STREET ADDRESS	1339 43RD AVE N.	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DONAHO, B A	4.2 NAME	
STREET ADDRESS	762 LIVE OAK TERR NE	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETE FL 33703	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCLEAN, B S	5.2 NAME	
STREET ADDRESS	2900 BANDERA WAY NE	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETE FL 33704	5.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DOUGLASS, T	6.2 NAME	DUANE KAUFHOLD
STREET ADDRESS	2811 PASS A GRILLE WAY	6.3 STREET ADDRESS	1200 MONTERBY BLVD NE.
CITY-ST-ZIP	ST PETE FL 33703	6.4 CITY-ST-ZIP	ST. PETERSBURG FL 33704

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 with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED *Leamer* Date: 5/26/99 Daytime Phone # \_\_\_\_\_

CR2E037 (11/98)

THE CHRISTMAS TOY SHOP PROJECT, INC.

Board of Directors  
1999 - 2000

573612-90016-7  
N33710

PRESIDENT.....	Duane Kaufhold	1200 Monterey Blvd. NE.,	04	896-4275
1st VP OPERATIONS.....	Ardith Rutland	1281 Snell Isle Blvd.,NE	04	895-0057
2nd V.P. DISTRIBUTION	Mary Ann Hewitt	715 42nd Ave., NE	03	898-5503
3rd V.P. VOLUNTEERS...	Juanita Salguero	4720 Locust St., NE #309	03	522-2187
TREASURER.....	Tom McLean	1339 43rd Ave., North	03	526-0262
SECRETARY .....	Nadean Jensen	4322 22nd Ave., N.	13	327-7888

DIRECTORS: (3 YEARS)

Marge Decker	300 17th Avenue NE	04	821-3707
Debbie Williams			
Dave Brown	532 26th St., South	12	327-6519
Peggy Altavilla	11345 Elmhurst, P.Park	33782	541-1518
Judy Lipton	2831 Edwards Ave., So.	05	823-8836
Christel Vinson	14893 Mockingbird Ln W	33760	531-2921
	(Clearwater, FL)		

DIRECTORS: (2 YEARS)

Michael Knettel	10265 Gulf Blvd. #206	06	367-0136
Brent S. McLean	200 Bandera Way, NE	04	823-3210
Barbara A. Donaho	762 Live Oak Terr., NE	03	522-6433
Fred Hartman	4553 35th Avenue North	13	525-3768
Ben Corey	927 31st Avenue NE	04	896-7918

DIRECTORS: (1 YEAR)

Liz Curry	525 Monterey Blvd, NE #204		823-0097
Gene F. Crummey	2700 45th Way North	13	321-3696
Jeff Wyatt	446 14th Avenue NE	01	821-1435
Grace Denhardt	8426 Tallahassee Dr.,NE	02	577-2074
Lee Slone	7250 10th Avenue North	10	381-8259
Tina Douglass	2811 Pass-A-Grille Way	06	367-3451
	(St. Pete Beach)		

<u>TELEPHONES:</u>	<u>NORTH POLE</u>	<u>550 16th St., North</u>	<u>05</u>	<u>898-3962</u>
	<u>SOUTH POLE</u>	<u>1655 16th St., South</u>	<u>05</u>	<u>821-5239</u>