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Jun 30 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N34021** (8)
1. Corporation Name
THE TAMPA BAY MALE CLUB, INC.



Principal Place of Business P O BOX 173143 TAMPA FL 33672-1143 US	Mailing Address P O BOX 173143 TAMPA FL 33672-1143 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/05/1989	3a. Date of Last Report 05/28/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3038370	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THOMPSON, ESSIE M
1101 RIFLECREST AVE
VALRICO FL 33594**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	D WIGGINS, PAUL 3413 E KNOLLWOOD TAMPA FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	VP CHRISTIAN, DAVID 11944 SKYLAKE PLACE TAMPA FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	D CHRISTIAN, DAVID 11944 SKYLAKE PLACE TAMPA, FL.
<input type="checkbox"/> DELETE	P REDHEAD, MICHAEL MONY, 3030 N ROCKY POINT DR, W TAMPA FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	D REDHEAD, MICHAEL MONY, 3030 N. ROCKY POINT DR, W, TAMPA, FL.
<input type="checkbox"/> DELETE	S WATTS, RANDY 8927 BEELER DR TAMPA FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	T MONROE, ROBERT A 1206 PARRILLA DE AVILA TAMPA FL 33613-1081	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	D MONROE, ROBERT A. 1206 PARRILLA DE AVILA TAMPA, FL 33613-1081
<input type="checkbox"/> DELETE	PA WATTS, RANDY 8927 BEELER DRIVE TAMPA FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	D WATTS, RANDY 8927 BEELER DRIVE TAMPA, FL.

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.

SIGNATURE

[Signature]

4/24/97 813-960-9052

CR2E037 (9/96)