

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N34677 (7)

1. Corporation Name

COMMUNITY LAW PROGRAM, INC.



Principal Place of Business

Mailing Address

33 4TH STREET NORTH  
SUITE 208  
ST PETERSBURG FL 33701

33 4TH STREET NORTH  
SUITE 208  
ST PETERSBURG FL 33701

3. Date Incorporated or Qualified  
10/13/1989

3a. Date of Last Report  
02/06/1995

2. Principal Place of Business

2a. Mailing Address

21 3420 EIGHTH AVENUE SOUTH

26 3420 EIGHTH AVENUE SOUTH

4. FEI Number

59-2970727

Applied For

Not Applicable

Suite, Apt. #, etc

22 #109

Suite, Apt. #, etc

27 #109

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

23 ST. PETERSBURG, FL

City & State

28 ST. PETERSBURG, FL

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

Zip

24 33711

Country

25 USA

Zip

29 33711

Country

30 USA

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

ST PETERSBURG BAR ASSOCIATION  
2600 9TH STREET NORTH  
ST PETERSBURG FL FL 33704

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 not stating)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE ☐ DELETE

NAME  
CUNNINGHAM, JOHN P.  
STREET ADDRESS  
641 1ST STREET SOUTH  
CITY-ST-ZIP  
ST PETERSBURG FL 33731-0358

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
LOPEZ, KAREN B.  
STREET ADDRESS  
1801 8TH STREET NORTH  
CITY-ST-ZIP  
ST PETERSBURG FL 33731-3192

2.1 TITLE ☒ Change ☐ Addition

TITLE ☒ DELETE

NAME  
WHITE, CYNTHIA R.  
STREET ADDRESS  
763 26TH AVENUE NORTH  
CITY-ST-ZIP  
ST PETERSBURG FL 33734

2.2 NAME ☐ Change ☒ Addition

TITLE ☒ DELETE

NAME  
BATTAGLIA, BRIAN  
STREET ADDRESS  
980 TYRONE BLVD. N.  
CITY-ST-ZIP  
ST PETERSBURG FL 33710

3.1 TITLE ☐ Change ☒ Addition

TITLE ☐ DELETE

NAME  
HARRIS, DR. CALVIN  
STREET ADDRESS  
8580 66TH STREET NORTH  
CITY-ST-ZIP  
PINELLAS PARK FL 34665

4.1 TITLE ☐ Change ☐ Addition

TITLE ☒ DELETE

NAME  
BERGMAN, NORA  
STREET ADDRESS  
360 CENTRAL AVENUE, SUITE 1220  
CITY-ST-ZIP  
ST. PETERSBURG FL

5.1 TITLE ☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: STEWART O. OLSON, PRESIDENT

1/30/96 (813) 898-9011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

COMMUNITY LAW PROGRAM, INC.  
BOARD OF TRUSTEES  
1995-1996

January 25, 1996

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