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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

AFFORDABLE HOUSING CORPORATION OF PINELLAS COUNT

| Y, INC. | • | | | | | | | | | | | |
|--|--|----------------|---------------------|--------------|----------|---------------|-----------------|---|----------------------------|--|--------|---------------------|
| Principal Place of Business Mailing Address | | | | | | | |) (BALLINA ONN TITLI JEDER OF | 1 88 1118 6 1111 B1 | | | i 0191 106 |
| 1040 SANABEL CT. NE. P.O. BOX 40988 ST PETERSBURG FL 33702 ST PETERSBURG FL 3 | | | | 13-0988 | | | | | | | | |
| | | | | | | | ; | Date Incorporated or Qua 04/11/1990 | alified 3 | a. Date of La 05/01/ | | |
| 2. Principal P | lace of Business | ⊢ | ailing Address | | | | | 4. FEI Number 59-3008187 | | | + | lied For |
| Sulte, Apt. | # atc | 26 | Suite, Apt. #, etc. | | | | | 38 0000 101 | | 607 | | Applicable |
| 22 | π, οιο. | 27 | | | | |] ! | Certificate of Status Desi | red 🎏 | | e Red | dditional Julred |
| City & State | | | City & State | | | | | 6. Election Campaign Finan | cina | \$5 | 00 1 | /lay Be |
| 23 | | 28 | | | | | | Trust Fund Contribution | | | | Fees |
| Zip | Country | Zip | · | ├ ──┐ | ıntry | | 77 | 8. This corporation has liab | _ | | ers. | 199.032, |
| 24 | 25 | 29 | d fami | 30] | r | | | Florida Statutes | Ye | | | |
| | 9, Name and Address of Curre | nt Hegistere | a Agent | | 81 | Name | | 0. Name and Address of h | lew Hegiste | erea Agent | | |
| OCDECT | 4 141470 4 | | | | <u>"</u> | INAITIE | , | | | | | |
| SEBESTA, JAMES A. 1040 SANABEL COURT NE | | | | | 82 | Street | Address | (P.O. Box Number is Not Ad | ceptable) | | | |
| | RSBURG FL 33702 | | | | | | | | | | | |
| 01.1616 | | | | | | 011 | | | | I A- | O | |
| | | | | | 84 | City | | | | FL 85 3 | Zip Ci | 000 |
| 11. Pursuant | to the provisions of Sections 617.05 registered agent, or both, in the State | 02 and 617. | 1508, Florida Statu | ites, the a | pove | -named | d corporat | tion submits this statement f | or the purpo | ose of changi | ng its | registered |
| agent. I a | im familiar with, and accept the oblig | gations of, Se | ection 617.0503, F | lorida Sta | tutes | ine cor i. | iporation s | s poard or directors. Thereb | y accept the | e appointmen | Lasie | egistered |
| SIGNATURE | | | | | | | | | | | | |
| 40 | Signature, typed or printed name of registered ag | | | | d Ape | nulangia In | re required wh | hen reinstating) | | ATE | 7000 | 111110 |
| 12. | OFFICERS AN | ND DIRECTO | DELETE | 13. 11 Te | Ti C | | 10 7 | ADDITIONS/CHANGES TO | OFFICERS | Char | | Addition |
| NAME | FEINBERG, RICHARD R. | | | 1.1 I | | | 110 | | | Cona | igc | □ Addition |
| STREET ADDRESS | 12125 FIFTH STREET EAST | | | - 1 | | ADDRESS | 1 | | | | | |
| CITY-ST-ZIP | TREASURE ISLAND FL | | | | ITY-S | | | | | | | |
| TITLE | - 1 P | | DELETE | 2.1 TI | | | - | 7 | | ☐ Char | nge | Addition |
| NAME | STONE, JOHN W | | | 2.2 N | AME | | Rol | bert Rowan e Fourth Stra | -0 11 | | | , , |
| STREET ADDRESS | 121 NORTH OSCEOLA AVE | | | 2.3 S | TREET | address | One | e Fourth Stra | 1710/16 | | | |
| CITY-ST-ZIP | CLEARWATER FL | | <u> </u> | 2.40 | HY-S | T-ZIP | <u> 5+</u> | Petrisburg, | H 337 | 101 | | |
| TITLE | TV | | DELETE | 3.1 1 | | | | | | ☐ Char | ige | Addition |
| NAME | DYSON, ANGIE 1705 NORTH HOWARD | | | 3.2 N | | | 1.26 | n Schesta- 3 - 946 avenue | γ_{0} | | | |
| STREET ADDRESS | TAMPA FL | | | | | ADDRESS | | Petersburg, K | | 12 | | - |
| CITY-ST-ZIP TITLE | | | DELETE | 3.4. U | | T - ZIP | | 1 4131019,14 | 3377 | Char | | Addition |
| NAME | UNLEY, DENISE G | | | 4.2N | | | TP | | |) —# | .90 | , NOOMON |
| STREET ADDRESS | 200 CENTRAL AVENUE, THIS | RD FLOOR | | - 2 | | ADDRESS | | | | | | İ |
| CITY+ST-ZIP | ST PETERSBURG FL 33701 | | . / | | TY-S | | 1 | | | | | |
| TITLE | 18 | | DELETE | 5.1 1 | | | T- | | | Char | | Addition |
| NAME | GROSS, SHERI | | <i>(</i> ' \ | 5.2 N | AME | | da | rol Seaman | | | | " \ |
| STREET ADDRESS | 23684 US 19 NORTH | | | 5.3 \$ | TREET | ADDRESS | 143 | rol Seaman South Fort Hori | ison,5 | suite 30 | 5D | |
| CITY-ST-ZIP | CLEARWATER FL | | | 5.4 C | TY-S | r-ZIP | Cle | arwater, 713 | 34616 | | | _ [|
| TITLE | -1113 - | | DELETE | 6.1 Tr | | | 73 | | | Char | ige | ☐ Addition |
| NAME | BRICKLEY, PAMELA NEET | | | 6.2 N | AME | | ` ` | • | | , , | | |
| STREET ADDRESS | 4901 34TH ST SOUTH | | | 6.3 S | TREET | ADDRESS | | | | | | |

14. Ido 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.

FILED

Jun 09 1997 8:00am

Secretary of State