

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N38878

(7)

1. Corporation Name

**THE BOYS CLUBS OF PINELLAS COUNTY ENDOWMENT FUND
, INC.**

Principal Place of Business

**5111 66TH ST., N.
SUITE 200
ST. PETERSBURG FL 33709
US**

Mailing Address

**5111 66TH ST., N.
SUITE 200
ST. PETERSBURG FL 33709
US**



3. Date Incorporated or Qualified

06/29/1990

3a. Date of Last Report

02/13/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PERRI, NELSON
5111 66TH ST., N.
SUITE 200
ST. PETERSBURG FL 33709**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE

1.1 TITLE PD ☐ Change ☒ Addition

NAME VINCENT, DEBORAH
STREET ADDRESS 210 S. EWING AVE.
CITY-ST-ZIP CLEARWATER FL

1.2 NAME James C. Goss
1.3 STREET ADDRESS 1201 Macrae Avenue
1.4 CITY-ST-ZIP Clearwater, FL 34615

TITLE VD ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME COATS, JAMES F.
STREET ADDRESS 250 ULMERTON RD.
CITY-ST-ZIP LARGO FL

2.2 NAME ☐ Change ☐ Addition

TITLE VD ☐ DELETE

2.3 STREET ADDRESS ☐ Change ☐ Addition

NAME ZUROWSKI, TERRY L.
STREET ADDRESS 11500 9TH ST., N.
CITY-ST-ZIP ST. PETERSBURG FL

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME PERRI, NELSON
STREET ADDRESS 7748 61ST STREET NORTH
CITY-ST-ZIP PINELLAS PARK FL

3.2 NAME ☐ Change ☐ Addition

TITLE SD ☐ DELETE

3.3 STREET ADDRESS ☐ Change ☐ Addition

NAME KIEFER, JOSEPH N.
STREET ADDRESS 1395 PINELLAS AVE.
CITY-ST-ZIP TARPON SPRINGS FL

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME GUARINO, JOHN
STREET ADDRESS 3637 4TH ST. NO. #200
CITY-ST-ZIP ST. PETERSBURG FL

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ 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:

James C. Goss
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/96

Date

(813) 546-1032

Daytime Phone #

CR2E037 (12/95)