

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 08, 1999 8:00 am
Secretary of State

03-08-1999 90082 029 ****70.00

DOCUMENT # N42964

1. Corporation Name

SOPHISTICATED LADIES OF TAMPA BAY, INC.

Principal Place of Business

% HUDSON, SELPHENIA
2118 E CARACAS ST
TAMPA FL 33610-5027
US

Mailing Address

2118 E CARACAS ST
TAMPA FL 33610-5027
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

04/15/1991

4. FEI Number

59-3095954

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

HUDSON, SELPHENIA
2118 E. CARACAS ST.
TAMPA FL 33610-5027

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

Stephen A. Hudson

2/25/99

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	HUDSON, SELPHENIA	
STREET ADDRESS	% 2118 E. CARACAS ST.	
CITY-ST-ZIP	TAMPA FL	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	BLOOM, JOYCE	
STREET ADDRESS	8801 NORTH 14TH ST	
CITY-ST-ZIP	TAMPA FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	CLEGGETT, ROSETTA	
STREET ADDRESS	701 N. CASTLE CT.	
CITY-ST-ZIP	TAMPA FL 33612	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	SHEEHY, CAROLYN	
STREET ADDRESS	3906 STATE STREET	
CITY-ST-ZIP	TAMPA FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	INGHRAM, THELMA	
STREET ADDRESS	7232 HAMMETT RD	
CITY-ST-ZIP	TAMPA FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	WILLIAMS, WILLIE MAE	
STREET ADDRESS	4213 LAUREL ST	
CITY-ST-ZIP	TAMPA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: *Stephen A. Hudson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/99 (813) 871-7698

Date

Daytime Phone #

CR2E037 (11/98)