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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 27 PM 3:19

DOCUMENT # N43802 (0)

1. Corporation Name

SUNCOAST FLORIDA CHAPTER OF THE AMERICAN SOCIETY
FOR TRAINING AND DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

5300 75TH ST NORTH
ST. PETERSBURG FL 33709

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ST. PETERSBURG FL 33709

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/06/1991

3a. Date of Last Report

02/08/1994

4. FEI Number

59-3083070

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

AUNSPAUGH, PAUL E. JR
5300 75TH ST NO
ST. PETERSBURG FL 33709

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME NEWMAN, ARLENE
STREET ADDRESS 4813 UMBER WAY
CITY - ST - ZIP TAMPA FL 33624

TITLE DV
NAME TELLIS, ALICIA
STREET ADDRESS 18108 DAWNVIEW DR.
CITY - ST - ZIP TAMPA FL 33624

TITLE DP
NAME MORRIS-HARDY, JUDY
STREET ADDRESS 2108 SOUTH HESPEREDES ST
CITY - ST - ZIP TAMPA FL 33629

TITLE DT
NAME AUNSPAUGH, PAUL E. JR
STREET ADDRESS 5300 75TH ST NO
CITY - ST - ZIP ST. PETERSBURG FL 33709-2414

TITLE S
NAME BAILEY, LINDA
STREET ADDRESS 5181 HORSESHOE PLACE N.E.
CITY - ST - ZIP ST. PETERSBURG FL 33703

TITLE D
NAME GILL, PATRICIA
STREET ADDRESS P.O. BOX 1496 N/A
CITY - ST - ZIP EATON PARK FL 33840

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE P
12 NAME Copeland, Charles
13 STREET ADDRESS 5540 Rio Vista Drive
14 CITY - ST - ZIP Clearwater, FL 34620

21 TITLE V
22 NAME Smolen, Patricia
23 STREET ADDRESS 560 Carillon Parkway
24 CITY - ST - ZIP St. Petersburg, FL 33716

31 TITLE D
32 NAME Dishler, Inette
33 STREET ADDRESS 916 Terra Mar Drive
34 CITY - ST - ZIP Tampa, FL 33613

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE S
52 NAME Detrick, Connie
53 STREET ADDRESS 601 South Boulevard
54 CITY - ST - ZIP Tampa, FL 33606-2677

61 TITLE D
62 NAME Fakey, Bethmarie
63 STREET ADDRESS 4809 East Busch Boulevard, Suite 208
64 CITY - ST - ZIP Tampa, FL 33617

DIRECTORS IN 12

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

☒ 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 110.07(3)(b), 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:

Paul E. Aunspach Jr.

Paul E. Aunspach Jr.

2/16/95

(813)522-6658

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number