FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N46518

TAMPA BAY SURVEY AND MAPPING SCHOLARSHIP FUND, I

FILED	
Apr 02 1998 8:00an	n
Secretary of State	

NC.						
Principal Place of Business	Mailing Address			<u> </u>		
3118 KENSINGTON AVENUE TAMPA FL 33629				3. Date Incorporated or Qualified 12/16/1991 4. FEI Number Applied For		
2. Principal Place of Business	2a. Mailing Address				NOT APPLICABLE Not Applicable	
21	26 Mailing Address				5. Certificate of Status Desired	
Suite, Apt. #, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May 8e	
22	27				Trust Fund Contribution Added to Fees	
City & State	City & State				7. Is this nonprofit corporation a homeowners association?	
23	28	1 0	-1		☐ Yes ☐ No	
Zip Country	Zip 29	30 Cou	ntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
9. Name and Address of Current I		[30]			Personal Property Tax due June 30. Li Yes Li No 10. Name and Address of New Registered Agent	
			81	Name	(A) trains stre position of the training section (A)	
LESTER, JOHN						
3118 KENSINGTON AVENUE			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
TAMPA FL 33629			83			
			84	City	85 Zip Code	
				•	FL 1	
 Pursuant to the provisions of Sections 617.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation 	and 617.1508, Florida Statu Florida. Such change was ons of, Section 617.0503, Fl	tes, the al authorize orida Stat	bove- d by lutes.	named corp the corporat	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE						
Signature, typed or printed name of registered agent			d Agent	t signature requi-	fred when reinstaling) DATE	
12. OFFICERS AND	DIRECTORS DELETE	13.	*	12	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D CARON, MAGARET H	M. Derese	1.1 Ti		D		
STREET ADDRESS 3910 US HWY 301 N., STE. 140	1	1.2 N/			HOMPSON, RAYMOND OOO BEACH PLAZA, #802	
CITY-ST-ZIP TAMPA FL	J		TY-ST		T. PETE BEACH, FL 33706	
TITLE V	DELETE	2.1 TI		-2F S	Change Addition	
NAME CLANTON, ROBERT JOHN		2.2 NAM				
STREET ADDRESS 914 E. CURTIS ST.				LDORESS		
CITY-ST-ZIP TAMPA FL			ITY-ST			
TITLE T	DELETE	3.1 TI			Change Addition	
NAME LESTER, JOHN		3.2 N	AME			
STREET ADDRESS 3118 KENSINGTON AVENUE		3.3 \$1	TREET A	NDORESS		
CITY-ST-ZIP TAMPA FL		3.4. C	ITY-ST	r-zip		
TITLE P	DELETE	4.1 71	TLE		☐ Change ☐ Addition	
NAME WESTON, ROBERT S.		4.2 N	AME			
STREET ADDRESS 2984 MEADOW OAK DRIVE NO	RTH	4.3 S1	IREET A	UDDRESS		
CITY-ST-ZIP CLEARWATER FL			TY-ST	-ZIP		
TITLE D	☐ DELETE	5.1 TO		ļ	Change Addition	
NAME PIERCE, LESUE		5.2 N/				
STREET ADDRESS 8038 GARDNER RD.				VDDRESS		
CITY-ST-ZIP TAMPA FL	IX I pri eve		TY- \$1-		MAL	
TITLE D	™ DEL€TE	6.1 Tr		D	△ Change ☐ Addition	
NAME YOUNG, CINDY		6.2 N/			RADO, JENNIFER	
STREET ADDRESS 13105-D THOMASVILLE CR.					501 W. RIVER SHORES WAY	
CITY-ST-ZIP TAMPA FL	this filing does not qualify f		TY-ST	-ZIP TA	AMPA FL 33603 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 open attackment with an address.

SIGNATURE: -

813-744-5619

OFFICER AND DIRECTORS

D Timothy M. Brown 910 N. Parsons Avenue Brandon, FL 33510