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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1996	- T. T.	DIVISION OF	CORPOR	IATIONS					
DOCUI	MENT #	N46542	(9)	h t						
FIRST	NIGHT TAMPA	A BAY, INC.								
		,					)	PIDIA 1181 B.A.1.1		
Principal Place	e of Business		Mailing Address	<del></del> «				<b>14010 (ALT EVEN)</b> (		
	ennedy blvd.		101 EAST KENNEDY E	BLVD.						
SUITE 2200 TAMPA FL 33	3602		SUITE 2200 TAMPA FL 33602							
17m1 K 1 E Q	<b>~~~</b>		IMMEN TO SOUZ				Date Incorporated or Qualifie     12/20/1991	ed 3a. [	Date of Last 10/03/1	
2. Principal Pla	ace of Business		2a. Mailing Address				4. FEI Number			Applied For
21			26		<del></del> -		59-3151855		<del>+</del>	Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State	е		City & State	·····			6. Election Campaign Financing			May Be
23			28				Trust Fund Contribution		Adde	d to Fees
Zip 24	25	ountry	Zip 29	30 Cou	intry		This corporation has liability  Florida Statuton	for intangible to Yes		199.032,
		ddress of Current F		30			Florida Statutes  10. Name and Address of New			
					81 Narr	16				
BROWN,	, Beth anne				82 Stree	et Addre	ss (P.O. Box Number is Not Accep	otable)		
101 E. KENNEDY BLVD.										
SUITE 2					83					
I AMPA I	FL 33602				84 City				85 Zij	o Code
				1				FL	_ i !	
11. Pursuant t	to the provisions of a	Sections 617.0502 an	d 617.1508, Florida Statut	es, the abo	ve-named	coroorat	tion submits this statement for the	numose of ch	angino ite r	poletored office
11. Pursuant to or registere familiar wit	to the provisions of a ed agent, or both, in the and accept the c	Sections 617.0502 and the State of Florida.	nd 617.1508, Florida Statuti Such change was authoriz 617.0503, Florida Statutes	es, the abo ed by the c	ve-named corporation	corporation's board	tion submits this statement for the difference of the a	purpose of ch ppointment a	nanging its r s registered	egistered office agent. I am
Tarrinar Wit	to the provisions of ed agent, or both, in th, and accept the c	Sections 617.0502 ar n the State of Florida obligations of, Section	d 617.1508, Florida Statut Such change was authoriz 617.0503, Florida Statutes	es, the abo ed by the d	ve-named corporation	corporat n's board	tion submits this statement for the directors. I hereby accept the a	purpose of chi ppointment a	ianging its r s registered	egistered office agent. I am
SIGNATURE _	and accept the t	name of registered agent and	title if applicable (NC	TE: Registered			when reinstating)	purpose of ch ppointment a	ianging its r s registered	
SIGNATURE _	Signature, typed or printed	ooligations of, Section	title if applicable (NC	TE: Registered	Agent signatu			purpose of ch ppointment a	nanging its r s registered	RS IN 12
SIGNATURE _	Signature, typed or printed	name of registered agent and OFFICERS AND C	title if applicable (NC	TE: Registered	Agent signatu		when reinstating)	purpose of ch ppointment a	ianging its r s registered	
SIGNATURE	Signature, typed or printed  VPD  BROWN, BET	name of registered agent and OFFICERS AND E	title if applicable (NC)	TE: Registered 13. 1.1 Tri 1.2 NA	Agent signatur ILE AME	re required v	when reinstating)	purpose of ch ppointment a	nanging its r s registered	RS IN 12
SIGNATURE	Signature, typed or printed  VPD  BROWN, BET	name of registered agent and OFFICERS AND C	title if applicable (NC)	13. 1.1 Til 1.2 NA 1.3 ST	Agent signatu	re required v	when reinstating)	purpose of ch ppointment a	nanging its r s registered	RS IN 12
SIGNATURE	Signature, typed or printed  VPD  BROWN, BETI 101 E. KENNE	name of registered agent and OFFICERS AND E	title if applicable (NC)	13. 1.1 Til 1.2 NA 1.3 ST	Agent signat  TLE  NME  REET ADDRES  TY-ST-ZIP	re required v	when reinstating)	purpose of ch ppointment a	nanging its r s registered	RS IN 12
SIGNATURE	VPD BROWN, BETI 101 E. KENNE TAMPA FL VPD TAFT, ANDY	name of resistered agent and OFFICERS AND E H ANNE EDY BLVD, STE 23	thire if applicable (NC DIRECTORS DELETE	TE: Registered  13.  1.1 TH  1.2 NA  1.3 ST  1.4 CH	Agent signat  TLE  AME  REET ADDRES  TY-ST-ZIP  TLE	re required v	when reinstating)	purpose of ch ppointment a	langing its resistered  Director  Change	RS IN 12
SIGNATURE	VPD BROWN, BETI 101 E. KENNI TAMPA FL VPD TAFT, ANDY PO BOX 2387	name of resistered agent and OFFICERS AND E H ANNE EDY BLVD, STE 23	thire if applicable (NC) INECTORS  DELETE	13. 1.1 Til 1.2 NA 1.3 ST 1.4 CI 2 1 Til 2 2 NA 2 3 ST	Agent signal  TLE  NME  REET ADDRES  TY-ST-ZIP  TLE  NME  REET ADDRES	re required v	when reinstating)	purpose of ch ppointment a	langing its resistered  Director  Change	RS IN 12
SIGNATURE	Signature, typed or printed  VPD  BROWN, BETI 101 E. KENNE TAMPA FL  VPD TAFT, ANDY PO BOX 2387 TAMPA FL	name of resistered agent and OFFICERS AND E H ANNE EDY BLVD, STE 23	bile if applicable (NC DRECTORS DELETE	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CI 2.1 TH 2.2 NA 2.3 ST 2.4 CI	Agent signal A FLE MME REET ADDRES TY-ST-ZIP FLE MME REET ADDRES TY-ST-ZIP	re required v	when reinstating)	purpose of ci ppointment a DATE DEFICERS AN	D DIRECTO Change	PRS IN 12 Addition Addition
SIGNATURE _	Signature, typed or printed  VPD  BROWN, BETI 101 E. KENNE TAMPA FL  VPD TAFT, ANDY PO BOX 2387 TAMPA FL  PD	name of resistered agent and OFFICERS AND E H ANNE EDY BLVD, STE 23	thire if applicable (NC) INECTORS  DELETE	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CI 2.1 TH 2.2 NA 2.3 ST 2.4 CI 3.1 TH	Agent signal .  TLE  MME  REET ADDRES  TY-ST-ZIP  ILE  MME  REET ADDRES  ITY-ST-ZIP	re required v	when reinstating)	purpose of ci ppointment a DATE DEFICERS AN	langing its resistered  Director  Change	RS IN 12
SIGNATURE	Signature, typed or printed  VPD  BROWN, BETI 101 E. KENNE TAMPA FL  VPD TAFT, ANDY PO BOX 2387 TAMPA FL  PD SAUTSENA, L	name of registered agent and OFFICERS AND E H ANNE EDY BLVD, STE 23	bile if applicable (NC DRECTORS DELETE	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CH 2.1 TH 2.2 NA 2.3 ST 2.4 CH 3.1 TH 3.2 NA	Agent signel .  TLE  MME  REET ADDRES  TY-ST-ZIP  LLE  MME  REET ADDRES  TY-ST-ZIP  LLE  MME  REET ADDRES  MY-ST-ZIP  LLE  MME	s S	when reinstating)	purpose of ci ppointment a DATE DEFICERS AN	D DIRECTO Change	PRS IN 12 Addition Addition
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SIGNATURE  12.  TITLE  NAME  STREEL ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREEL ADDRESS  CITY-SI-ZIP  THLE  NAME  STREET ADDRESS  CITY-SI-ZIP  THLE  NAME  STREET ADDRESS  CITY-SI-ZIP	Signature, typed or printed  VPD  BROWN, BETI 101 E. KENNE TAMPA FL  VPD TAFT, ANDY PO BOX 2387 TAMPA FL  PD SAUTSENA, L 157 BISCAYN TAMPA FL TD	name of registered agent and OFFICERS AND E H ANNE EDY BLVD, STE 23 N/A INDA E AVE W	bile if applicable (NC DRECTORS DELETE	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CH 2.2 NA 2.3 ST 2.4 CH 3.1 TH 3.2 NA 3.3 ST 3.3 ST 3.4 CH 3.5 ST 3.5 S	Agent signel .  TLE  MME  REET ADDRES  TY-ST-ZIP  LE  MME  REET ADDRES  TY-ST-ZIP  LE  MME  REET ADDRES  TY-ST-ZIP	s S	when reinstating)	purpose of cr ppointment a pare PFFICERS AN	D DIRECTO Change	PRS IN 12 Addition Addition
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SIGNATURE 11.  TITLE   NAME   STREET ADDRESS   CITY-ST-ZIP   TITLE   TITLE   THE   THE	Signature, typed or printed  VPD  BROWN, BETI 101 E. KENNE TAMPA FL  VPD TAFT, ANDY PO BOX 2387 TAMPA FL  PD SAUTSENA, L 157 BISCAYN TAMPA FL  TO ROSICA, GRE 101 E. KENNE TAMPA FL  D BLAU, RICHAI PO BOX 1288	name of registered agent and OFFICERS AND E H ANNE EDY BLVD, STE 23 N/A INDA E AVE W  G EDY BLVD, STE 23	DELETE  DELETE  DELETE  DELETE	13. 1.1 Till 1.2 NA 1.3 ST 1.4 Cil 2 1 Till 2 2 NA 2 3 ST 2 4 Cil 3 1 Till 3 2 NA 3 3 ST 4 4 Cil 4 2 NA 4 3 ST 5 1 Till 5 2 NA 5 3 ST 5 4 Cil 5 4 Cil	Agent signal J  TLE  MME REET ADDRES TY-ST-ZIP  TLE  MME REET ADDRES TY-ST-ZIP  TLE  AME REET ADDRES TY-ST-ZIP  TLE  MME	s S	when reinstating)	purpose of cr ppointment a PATE DEFICERS AN	D DIRECTO Change Change Change	Addition  Addition  Addition  Addition
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oath; that I am an officer or director of the corporation or the receiver or trustee employers in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Gras Rosia as Transvia 2/23/96 8322468