## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

N46797

(9)

## KEEP PINELLAS COUNTY BEAUTIFUL, INC.

Principal Place	of Business	Mailing Address 1425 MAIN STREET. UNIT N DUNEDIN FL 34698-6247			a uttarisitat dir ditte deser ichtig batte	a amanalina man malitate attere imman autat intel manta manta manta manta minitati minitati minitati minitati	
1425 MAIN STE DUNEDIN FL 34							
					3. Date Incorporated or Qualified 01/13/1992	3a. Date of Last Report 08/12/1996	
2. Principal Pl.	ace of Business	2a. Mailing Address			4. FEI Number 65-0309717	Applied For Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						<b>60.75</b> (440)	
27					5. Certificate of Status Desired	Fee Required	
City & State         City & State           23         28					Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Cour	try	8. This corporation has liability for it		
24	25	29	30	•		Yes X No	
	9. Name and Address of Current	Registered Agent	<u> </u>		10. Name and Address of New Reg	istered Agent	
			1	31 Name	1		
LAPORTE, ANTHONY J			ŀi	32 Street	Address (P.O. Box Number is Not Acceptab	(0)	
C/O 1425 MAIN STREET				00000	Total Addition (1.0), DOX Hollings to Hot Acceptable)		
UNIT N			Ţī	33	3		
DUNEDI	N FL 34698		-  -	34 City		85 Zip Code	
					:	FL   '	
office or re agent. I ar	o the provisions of Sections 617.0502 agistered agent, or both, in the State o in familiar with, and accept the obligati	and 617.1508, Florida Statut f Florida. Such change was a ons of Section 617.0503, Fl	es, the abo authorized orida Statu	ove-named by the contest.	d corporation submits this statement for the proporation's board of directors. I hereby acceptions	rpose of changing its registered t the appointment as registered	
SIGNATURE _	Signature, lyped or printed name of registered agent	and title if applicable (NOT	E: Registered	Agent signatu	e required when reinstating)	DATE	
12.	OFFICERS AND		13.	***************************************	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	Р	X DELETE	1.1 TITL	E	Chairman/Director	Change Addition	
NAME	Marsh, Lee		1.2 NAA	IE	Thomas J. Pinta		
STREET ADDRESS	1425 MAIN STREET, UNIT N		1.3 STR	eet address	1425 Main St., Unit N		
CITY - ST - ZIP	DUNEDIN FL 34698		1.4 CITY	- ST - ZIP	Dunedin, FL 34698		
TITLE	VPD	LX DELETE	2.1 T(TL	E	V:-Chairman/Director	Change Addition	
NAME	PINTA, THOMAS		2.2 NAN	E	Andrew Grey		
STREET ADDRESS	1425 MAIN STREET, UNIT N		2.3 STR	EET ADDRESS	1425 Main St., Unit N		
CITY-SI-ZIP	DUNEDIN FL 34698	De sere		Y - ST - ZIP	Dunedin, FL 34698		
TITLE	SD	<b>■</b> DELETE	3.1 T∤TL		Secretary/Director	Change Addition	
NAME	KURZAWA, JENNIFER		3.2 NAN		Lucy Acquaviva		
STREET ADDRESS	1425 MAIN STREET, UNIT N			EET ADDRESS	1425 Main St., Unit N		
CITY-ST-ZIP	DUNEDIN FL 34698	<b>■</b> DELETE		Y-ST-ZIP	Dunedin, FL 34698		
TITLE	TD HOCOV HIDV	LAS DELETE	4.1 TITL	_	Treasurer/Director	Change Addition	
NAME	MCCOY, JUDY 1425 MAIN STREET, UNIT N		4. 2 NAI		Eunice Pinta		
STREET ADDRESS				EET ADDRESS	1425 Main St., Unit N		
CITY-SI-ZIP TITLE	DUNEDIN FL 34698 VPD	<b>★</b> DELETE	4.4 CITY 5.1 TITU	- ST- ZIP	Dunedin, FL 34698	Change Addition	
NAME	HUGG, BARBARA	J Dittil	5.1 H) C	_	Director	X charge Addition	
STREET ADDRESS	1425 MAIN STREET, UNIT N			EET ADDRESS	Traci Kampka		
	DUNEDIN FL 34698				1425 Main St., Unit N		
CITY-ST-ZIP TITLE	DONEON FL 34080	DELETE	6.1 TITU	'-ST-ZIP F	Dunedin, FL 34698	Change Addition	
NAME	LAPORTE, ANTHONY J		6.2 NAN		Director	A cimigo El radiilon	
STREET ADDRESS	1425 MAIN STREET, UNIT N			EET ADDRESS	Michael Ledford		
CHY-ST-ZIP	DUNEDIN FL 34698			-ST-ZIP	1425 Main St., Unit N Dunedin, FL 34698		
14. I do hereb	y certify that the information supplied	with this filing does not quali	fy for the e	noitamex	stated in Section 119.07(3)(i). Florida Statutes	. I further certify that the	
information	n indicated on this annual report or suj	oplemental annual report is t	rue and ac	curate an	d that my signature shall have the same legal report as required by Chapter 617, Florida St	effect as if made under path, that	

SIGNATURE: \_\_\_

1/8/97

813/738-4225

**FILED** 

Jan 16 1997 8:00am

Secretary of State

Daytime Phone # 0069448