SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT **CORPORATION** ANNUAL REPORT

Principal Place of Business

ST. PETERSBURG FL 33742

2. Principal Place of Business

Sulte, Apt. #, etc.

PRINCE, STANLEY

330 BAYVIEW DR N.E.

ST. PETERSBURG FL 33704

City & State

P O BOX 21511

21

22

23

24

Zip

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N48110

(3)

ST. PETERSBURG FL 33742

Malling Address

P O BOX 21511

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

29

Zip

TAMPA FRIENDS OF OLD TIME DANCE, INC.

Country

9. Name and Address of Current Registered Agent

	Secretary of State			
	3. Date Incorporated or Qualified 03/26/1992			
	4. FEI Number Applied For S9-3115966 Not Applied be			
	5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
	7. Is this nonprofit corporation a homeowners association?			
	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No			
Name	10. Name and Address of New Registered Agent			
Street /	Address (P.O. Box Number is Not Acceptable)			
City	FL 85 Zip Code			
med cor	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered			
ot elonelus	s required when reinstating) DATE			
· n engine				
	PD Change Addition			
DDRESS ZIP	ST. PETERS BURG, FL 337 04			

FILED

Sep 09 1998 8:00am

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 Sharebure, typed or printed theme of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE				
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DELETE	1.1 TITLE	PD Change Addition	
NAME	CALL, ROBERTA	1.2 NAME	I and DRINCE	
STREET ADDRESS	3618 W LYKES, #101	1.3 STREET ADDRESS	330 BAYVIEW DR NE	
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	ST. PETERSBURG, FL 33704	
TITLE	VPD DELETE	2.1 TITLE	∨ ひ Change	
NAME	CLARKE, LAURA	2.2 NAME	SAM MAHEOUD	
STREET ADDRESS	2454 8TH AVE N	2.3 STREET ADDRESS	3665 6. BAY DR. # 204-429	
CITY-ST-ZIP	ST, PETERSBURG FL	2.4 CITY-ST-ZIP	LARGO, FL 33711	
TITLE	TD DELETE	3.1 TITLE	TD Change Addition	
NAME	PRINCE, LINDA	3.2 NAME	STANCEY PRINCE	
	330 BAYVIEW DR N.E.	3.3 STREET ADDRESS	330 BAYVICH DR NE	
CITY-ST-ZIP	ST, PETERSBURG FL	3.4 CITY-ST-ZIP	St. Petersburg, FL 33704	
TITLE	SO DELETE	4.1 TITLE	[• i) [140 m	
NAME	STANEZYK, SUE	4.2 NAME	SUE STANCEYK	
	ECKERD COLLEGE-NAS 4200 54TH AVE. SOUTH	4.3 STREET ADDRESS	150% 12th RUN	
CITY-ST-ZIP	ST, PETERSBURG FL 33711	4.4 CITY-ST-ZIP	ST. PETERSBURG, FL 33701	
TITLE	DELETE	5.1 TITLE	Change Addition	
NAME	-	5.2 NAME	· ·	
STREET ADORESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE	Change Addition	
NAME	_	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		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)(1), Florida Statutes. I further certify that the information				

Country

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City 84

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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: Stanly R. Prince STANLER R. PRINCE AUGOST 28, 1994