

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N51187

(5)

1. Corporation Name

TAMPA BAY CHAPTER FLORIDA ASSOCIATION OF ENVIRONMENTAL PROFESSIONALS, INC.



Principal Place of Business

C/O THOMAS ROBERT CUBA
4557 BEACH DRIVE SE
ST. PETERSBURG FL 33705

Mailing Address

C/O THOMAS ROBERT CUBA
4557 BEACH DRIVE SE
ST. PETERSBURG FL 33705

3. Date Incorporated or Qualified

10/07/1992

3a. Date of Last Report

03/31/1995

2. Principal Place of Business

2a. Mailing Address

21 90 Stephen G. Swingle

26 90 Stephen G. Swingle

22 9009 Exposition Dr.

27 9009 Exposition Dr.

23 Tampa, FL 33624

28 Tampa, FL 33624

24 33624

29 33624

25 U.S.A.

30 U.S.A.

4. FEI Number

65-0364499

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

□

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

□ Yes

X No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HASBROUCK, BRUCE
891 CORDOVA BLVD., NE
ST. PETERSBURG FL 33704

81 Name

GEORGE G. FEHER
8675 - 15th Lane North
St. Petersburg

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

33702

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 GEORGE G. FEHER

(NOTE: Registered Agent signature required when reinstating)

DATE

5/16/96

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	CUBA, THOMAS ROBERT	
STREET ADDRESS	4557 BEACH DRIVE SE	
CITY - ST - ZIP	ST. PETERSBURG FL	
TITLE	DP	DELETE
NAME	HASBROUCK, BRUCE	
STREET ADDRESS	891 CORDOVA BLVD. NE	
CITY - ST - ZIP	ST. PETERSBURG FL	
TITLE	DVP	DELETE
NAME	MENENDEZ, ROGER J.	
STREET ADDRESS	2535 CYPRESS BEND DR. W	
CITY - ST - ZIP	CLEARWATER FL	
TITLE	DT	DELETE
NAME	PAGE, NANCY M.	
STREET ADDRESS	2026 DODGE ST.	
CITY - ST - ZIP	CLEARWATER FL	
TITLE	DS	DELETE
NAME	SWINGLE, STEPHEN G.	
STREET ADDRESS	4919 MEMORIAL HWY., STE. 200	
CITY - ST - ZIP	TAMPA FL	
TITLE	D	DELETE
NAME	SAVERCOOL, DANIEL	
STREET ADDRESS	5454 JET VIEW CIRCLE	
CITY - ST - ZIP	TAMPA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	Change	Addition
1.2 NAME	SAVERCOOL, DANIEL M.		
1.3 STREET ADDRESS	4413 AVENUE CANNES		
1.4 CITY - ST - ZIP	LUTZ, FL 33549		
2.1 TITLE	D	Change	Addition
2.2 NAME	HASBROUCK, BRUCE		
2.3 STREET ADDRESS	891 CORDOVA BLVD. NE		
2.4 CITY - ST - ZIP	ST. PETERSBURG, FL		
3.1 TITLE	D	Change	Addition
3.2 NAME	MENENDEZ, ROGER J.		
3.3 STREET ADDRESS	2535 CYPRESS BEND DR. W.		
3.4 CITY - ST - ZIP	CLEARWATER, FL		
4.1 TITLE	DT	Change	Addition
4.2 NAME	FEHER, GEORGE		
4.3 STREET ADDRESS	PO BOX 21046 7650 W. Courtney Csway		
4.4 CITY - ST - ZIP	TAMPA, FL 33607-3416 1462		
5.1 TITLE	DVP	Change	Addition
5.2 NAME	SWINGLE, STEPHEN G.		
5.3 STREET ADDRESS	4919 MEMORIAL HWY, STE 200		
5.4 CITY - ST - ZIP	TAMPA, FL		
6.1 TITLE	DE	Change	Addition
6.2 NAME	GIBBY, DANIEL J.		
6.3 STREET ADDRESS	301 E. KENNEDY BLVD., STE 1000		
6.4 CITY - ST - ZIP	TAMPA, FL 33601		

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 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/1/96 (813) 835-1115

Daytime Phone #