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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra S. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 1. Corporation Name N9200000166 (0)

HELP OF TAMPA BAY INC.

Principal Place of Business	Mailing Address				
46947 U.S. HWY. NORTH	-46947-U.S. HWY. NORTE				
SUITE 123	SUITE 123	1 664			
-TARPON SPRINGS-FL 34689	TARPON SPRINGS FL-94009 -		3. Date Incorporated or Qualified 11/06/1992	3a. Date of Last Re 06/13/19	port 96
2. Principal Place of Business 21 324 TAVERNIER DL	2a. Mailing Address 28 324 TAVE	RNIER DR	4. FEI Number 59-3154093	 	plied For (Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 A Fee Re	
City & State 23 OLOSMAR, FL	City & State 28 OLDSMAR	, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip Country 24 39677 25 US	^{Zip} 29 34677	Country 30		Yes 🔼 No	199.032,
9. Name and Address of Current	t Registered Agent		10. Name and Address of New Ro	egistered Agent	
		81 Name			
PRITCHARD, RANDY J		82 Street Ad	dress (P.O. Box Number is Not Accepta	ble)	
40347-U.S. HWY. NORTH		83 324	I MUERNIER DA	<u></u>	
SUITE 123		63			
_TARPON SPRINGS FL 34689		84 City	DSM AD	FL 85 Zip 0	Code
11. Pursuant to the provisions of Sections 617.0502	2 and 617.1508. Florida Statu	ites, the above-named co	progration submits this statement for the		s registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the boliga	of Florida, Such change was	authorized by the corpor	ration's board of directors. I hereby acce	pt the appointment as	registered
11/ 15/1977	KANDY TY	RITCHARD	4-3	0-97	
SIGNATURE Signature typed or printed name of registered ager		TE: Registered Agent signature rec	quired when reinstating)	DATE	
Signatur typed or printed name of registered ager 12. OFFICERS AND	or and title if applicable. (NC D DIRECTORS	TE: Registered Agent signature rec 13.	gulred when reinstaling) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	
12. OFFICERS AND TILE PD	nt and title if applicable. (NC	TE: Registered Agent signatura rec 13. 1.1 TITLE	······································		
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SIGNATURE

SIGNATULE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4-30-97(813)814-9494

FILED

May 19 1997 8:00am

Secretary of State

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Daytime Phone # 0079861