

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000001280 (7)

1. Corporation Name

TAMPA BAY'S BRIDAL ASSOCIATION, INC.



Principal Place of Business

648 CENTAL AVE.
ST. PETERSBURG FL 33701

Mailing Address

648 CENTAL AVE.
ST. PETERSBURG FL 33701

3. Date Incorporated or Qualified
03/19/1993

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 2481-J McMULLEN BOOTH RD

Suite, Apt. #, etc.

2a. Mailing Address

26 2481-J McMULLEN BOOTH RD

Suite, Apt. #, etc.

22 City & State

23 CLEARWATER, FLORIDA

Zip

24 34619

Country

25 PINELAS

27 City & State

28 CLEARWATER, FLA

Zip

29 34619

Country

30 PINELAS

4. FEI Number
59-3174096

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$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 ☒ No

9. Name and Address of Current Registered Agent

SNOW, GREGORY
2481-J MCMULLEN BOOTH RD.
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Gregory L. Snow

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
BARRY, RICHARD
STREET ADDRESS 648 CENTAL AVE.
CITY-ST-ZIP ST. PETERSBURG FL 33701

TITLE ☐ DELETE

NAME VP
STUMPED, DENNIS
STREET ADDRESS 7356 54 AVE. N.
CITY-ST-ZIP ST. PETERSBURG FL 33709

TITLE ☐ DELETE

NAME TD
ROUZER, NANCY
STREET ADDRESS 3537 8TH AVE. N.
CITY-ST-ZIP ST. PETERSBURG FL 33713

TITLE ☐ DELETE

NAME MD
PAPE, RICHARD
STREET ADDRESS 1369 PASADEAN AVE.
CITY-ST-ZIP ST. PETERSBURG FL 33707

TITLE ☐ DELETE

NAME MD
SNOW, GREG
STREET ADDRESS 2481-J MCMULLEN BOOTH RD.
CITY-ST-ZIP CLEARWATER FL 34619

TITLE ☐ DELETE

NAME MD
JOHNSON, P.J.
STREET ADDRESS 4601 W. KENNEDY BLVD. STE. 209
CITY-ST-ZIP TAMPA FL 33609

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D PRESIDENT ☒ Change ☐ Addition

1.2 NAME GREGORY L. SNOW
1.3 STREET ADDRESS 2481-J MCMULLEN BOOTH RD
1.4 CITY-ST-ZIP CLEARWATER, FLA 34619

2.1 TITLE D TONY ANGEL VICE PRESIDENT ☒ Change ☐ Addition

2.2 NAME TONY ANGEL
2.3 STREET ADDRESS 8853 PARK BLVD
2.4 CITY-ST-ZIP SEMINOLE, FLA 34647

3.1 TITLE D TRESURET ☒ Change ☐ Addition

3.2 NAME PATRICIA JOHNSON
3.3 STREET ADDRESS 4601 WEST KENNEDY BLVD #209
3.4 CITY-ST-ZIP TAMPA, FLA 33614

4.1 TITLE D SECRETARY ☒ Change ☐ Addition

4.2 NAME DARLENE LANGE
4.3 STREET ADDRESS 5105 WEST CYPRESS ST.
4.4 CITY-ST-ZIP TAMPA, FL 33607

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS 900001864589
5.4 CITY-ST-ZIP -06/18/96--01011--041
5.5 CITY-ST-ZIP ***61.25

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Gregory L. Snow
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

City

Daytime Phone #

(813) 726 5466

CR2E037 (12/95)