

FILE NOW: FILING FEE IS \$61.25

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Mar 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000001280 (7)

1. Corporation Name

TAMPA BAY'S BRIDAL ASSOCIATION, INC.

Principal Place of Business

2481-J MCMULLEN BOOTH RD.
CLEARWATER FL 34619

Mailing Address

2481-J MCMULLEN BOOTH RD.
CLEARWATER FL 34619-1346



3. Date Incorporated or Qualified 03/19/1993
3a. Date of Last Report 06/17/1996

2. Principal Place of Business	2a. Mailing Address
21 11246 WEST Hillsborough Ave Suite, Apt #, etc.	26 11246 WEST Hillsborough Ave Suite, Apt #, etc.
22 City & State TAMPA, FL	27 City & State TAMPA, FL
23 Zip 33635	28 Zip 33635
24 Country Hillsborough	29 Country Hillsborough

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 GREGORY SNOW
82 Street Address (P.O. Box Number is Not Acceptable) 11246 WEST Hillsborough AVE
83
84 City TAMPA
85 Zip Code 33635

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*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SNOW, GREGORY L	1.2 NAME	
STREET ADDRESS	2481-J MCMULLEN BOOTH RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34619	1.4 CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANGEL, TONY	2.2 NAME	
STREET ADDRESS	8853 PARK BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	SEMINOLE FL 34647	2.4 CITY-ST-ZIP	
TITLE	DT <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, PATRICIA	3.2 NAME	
STREET ADDRESS	4601 W. KENNEDY BLVD. #209	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33614	3.4 CITY-ST-ZIP	
TITLE	DS <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANGE, DARLENE	4.2 NAME	JULIA SHANABARGER
STREET ADDRESS	5105 W. CYPRESS ST.	4.3 STREET ADDRESS	6973 86th AVE N.
CITY-ST-ZIP	TAMPA FL 33607	4.4 CITY-ST-ZIP	PINELLAS PARK, FL
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	MARK SMITH
STREET ADDRESS		5.3 STREET ADDRESS	14848 PARCLOS CIRCLE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	TAMPA, FL 33624
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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* GREGORY SNOW

3/14/97 (813) 8149100

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0067130

CR2E037 (9/96)