

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91323 004 ****61.25

DOCUMENT # N93000001312	
1. Entity Name Treasure Island Charities, Inc	
DO NOT WRITE IN THIS SPACE	

667955

2. Principal Place of Business 12781 Kingfish Drive <small>Suite, Apt. #, etc.</small>	3. Mailing Address 12781 Kingfish Drive <small>Suite, Apt. #, etc.</small>
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DO NOT WRITE IN THIS SPACE

City & State Treasure Island, FL	City & State Treasure Island, FL	4. FEI Number 59-3170845	Applied For <input type="checkbox"/> Not Applicable
Zip 33706	Country USA	Zip 33706	Country USA
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent
	Name Terry Farner
	Street Address (P.O. Box Number is Not Acceptable) 12781 Kingfish Drive
	City Treasure Island FL Zip Code 33706

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FEE IS \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS			
TITLE	PD	TITLE	
NAME	Terry Farner	NAME	
STREET ADDRESS	3814 - 48th Avenue South	STREET ADDRESS	
CITY - ST - ZIP	St. Petersburg, FL 33711	CITY - ST - ZIP	
TITLE	VD	TITLE	
NAME	Robert Stiles	NAME	
STREET ADDRESS	7300 - 4th Avenue South	STREET ADDRESS	
CITY - ST - ZIP	St. Petersburg, FL 33707	CITY - ST - ZIP	
TITLE	D	TITLE	
NAME	Jon Willis	NAME	
STREET ADDRESS	1561 - 44th Avenue N.E.	STREET ADDRESS	
CITY - ST - ZIP	St. Petersburg, FL 33703	CITY - ST - ZIP	
TITLE	D	TITLE	
NAME	Sid Rice	NAME	
STREET ADDRESS	47 Dolphin Drive	STREET ADDRESS	
CITY - ST - ZIP	Treasure Island, FL 33706	CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: 

Jon Willis Exec. Dir

(727) 363-0071

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #