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NONPROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # N93000002539 (5)

1. Corporation Name

GREATER TAMPA BAY MARINE ADVISORY COUNCIL PORTS, INC.

Principal Place of Business	Mailing Address
UNIV OF SO FL/DEPT OF MARINE SCIENCE 140TH AVENUE SOUTH ST PETERSBURG FL 33701	UNIV OF SO FL/DEPT OF MARINE SCIENCE 140TH AVENUE SOUTH ST PETERSBURG FL 33701

3. Date Incorporated or Qualified: 06/11/1993
3a. Date of Last Report: 06/06/1995

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-3187770 ☐ 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

CHAPIN, LEE
UNIV SO FL/DEPT OF MARINE SCIENCE
140TH AVENUE SOUTH
ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name: Buck, Jeffery E
82 Street Address (P.O. Box Number is Not Acceptable): Univ So FL/ Dept of Marine Science
83: 140th Ave S
84 City: St Petersburg FL 85 Zip Code: 33701

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: Jeffery E Buck — Jeffery E Buck — Director — DATE: 4/1/96
Signature of registered agent and printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when not shown)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☒ DELETE CHAPIN, LEE UNIV SO FL/DEPT MARINE SCIENCE 140TH AVE S ST PETERSBURG FL 33701	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D ☒ Change ☐ Addition LUTHER, MARK UNIV SO FL/DEPT MARINE SCIENCE 140TH AVE S ST PETERSBURG FL 33701
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ DELETE BUCK, JEFFERY E UNIV SO FL/DEPT MARINE SCIENCE 140TH AVE S ST PETERSBURG FL 33701	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ DELETE SPENCE, DON E UNIV SO FL/DEPT MARINE SCIENCE 140TH AVE S ST PETERSBURG FL 33701	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ DELETE MCDONALD, PAUL UNIV SO FL/DEPT MARINE SCIENCE 140TH AVE S ST PETERSBURG FL 33701	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ DELETE FIDLER, STEVE UNIV SO FL/DEPT MARINE SCIENCE 140TH AVE S ST PETERSBURG FL 33701	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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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: Jeffery E Buck — Jeffery E Buck — 4/1/96 — 813 248 3732
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #