

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N93000003276 (3)

1. Corporation Name

EMPACT RESOURCE SERVICE CENTER, INC.

Principal Place of Business

3510 1ST AVE NORTH  
STE 124  
ST. PETERSBURG FL 33713  
US

Mailing Address

PO BOX 0117  
ST. PETERSBURG FL 33731-0117  
US



3. Date Incorporated or Qualified  
07/21/1993

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

4. FEI Number  
59-3196080

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

2. Principal Place of Business

2a. Mailing Address

21 3100 1st Ave. N

26 P. O. Box 117

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 ST. Petersburg, FL

28 ST. Petersburg, FL

24 33713

25 USA

29 33731

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBINSON, BESSIE  
3510 1ST AVE NORTH  
STE 124  
ST. PETERSBURG FL 33713

81 Name Evelyn V. Smith  
82 Street Address (P.O. Box Number is Not Acceptable)  
3100 1st Avenue North  
83 ST. Petersburg  
84 City

FL 85 Zip Code  
33731

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 *Evelyn V. Smith* Executive Director

DATE 4/23/96

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	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	ROBINSON, BESSIE	3510 1ST AVE NORTH	ST. PETERSBURG FL	<input checked="" type="checkbox"/>
D	SMITH, EVELYN V	3510 1ST AVE NORTH	ST. PETERSBURG FL	<input checked="" type="checkbox"/>
D	BOOKER, BETTY	3510 1ST AVE NORTH	ST. PETERSBURG FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
Chairman of the Board	Cecelia Monroe	3100 1st Avenue North	ST. Petersburg, FL 33731	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vice President	Louise Boykins	3100 1st Avenue North	ST. Petersburg, FL 33731	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Treasurer	Betty Booker	3100 1st Avenue N.	ST. Petersburg, FL 33731	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Cecelia K. Monroe*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 4-24-96

DATE

Daytime Phone #

CR2E037 (12/95)