## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

N93000005018 (7) DOCUMENT #
1. Corporation Name

## SERGEANT ALLEN MOORE COMMUNITY PARTNERSHIP, INC.

Principal Place of Business

Mailing Address

**FILED** Apr 09 1997 8:00am Secretary of State



1201 N BETTY I		1201 N BETTY LANE CLEARWATER FL 34615-33	06		
US		US		3. Date Incorporated or Qualified 11/08/1993	3a. Date of Last Report 02/14/1996
2. Principal Pla		2a. Mailing Address 2b. /20/ N. Be	Hy Lane	4. FEI Number 59-3253712	Applied For Not Applicable
Suite, Apt #	N. Betty Lane.	Suite, Apt. #, etc.	7	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State  23 CLC.47	water, Florida	City & State 28 Clearwat	er, Florida	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 34615		29 34615	30 PINELLAS		Yes V No
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  B1 Name Smiley, Joseph					
SMILEY, JOSEPH 19321 US 19 N			82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 415					
	ATER FL 34615		84 City	learwater	FL 85 Zip Code 34615
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 _	Signature, typed or printed name of registered agent	quired when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	SMILEY, JOSEPH		1.2 NAME		j
STREET ADDRESS	1201 N BETTY LANE		1.3 STREET ADDRESS		[8
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY - ST - ZIP		.
TITLE	D D	DELETE	2.1 TITLE <b>D</b>	0	Change Addition
NAME	BOONE, RANDY	<b></b>	2.2 NAME	Dixon, Bernara	
	1532 LONG ST		2.3 STREET ADDRESS	Dixon, Bernard 112904 Borda Circ	
STREET ADDRESS				Largo, FL 34643	
CITY-ST-ZIP	CLEARWATER FL 34615	DELETE	2.4 CITY+ST-ZIP 3.1 TITLE	Chidolen 24942	Change Addition
TITLE	D	□ DECETE			C Change C Audition
NAME	ROJAS, LARRY		3.2 NAME		
STREET ADDRESS	P O BOX 546 N/A		3.3 STREET ADDRESS		
CITY - ST - ZIP	CLEARWATER FL 34615	D nevers	3.4. CITY - ST - ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition
NAME	VALMA, MARGARETTE		4. 2 NAME		
STREET ADDRESS	1001 CARLTON ST		4.3 STREET ADDRESS		,
CITY-ST-ZIP	CLEARWATER FL 34615		4.4 CITY-ST-ZIP		
TITLE	D	DELETE	5.1 TITLE D	Pitta Lucius	Change L Addition
NAME	HODGES, MAYME		5.2 NAME	1325 Sociadale Stre	ect
STREET ADDRESS	1162 LA SALLE		5.3 STREET ADDRESS	Spingue -	
CHTY-ST-ZIP	CLEARWATER FL 34615		5.4 CITY - ST - ZIP	Pitts, Lucius 1325 Springdale Stre Clearwater, FL 346	016
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. Ldo bereb	y certify that the information supplied	with this fiting does not quali		ted in Section 119.07(3)(i), Florida Statutes	s. 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 eath; 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: Oseph Smiley Chairman 4/3/97