FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300005018 (7)

sergeant allen moore community partnership, inc

FILED Feb 17 1998 8:00am Secretary of State

SENGEANT ALLEN MOONE COMMUNITY PARTNERSHIP, INC.					
Principal Place of Business		Mailing Address			
CLEARWATER FL 34615		1201 N BETTY LANE CLEARWATER FL 34615 US		Date Incorporated or Qualified 11/08/1993	
				4. FÉ I Number Applied For S9-3253712 Not Applicable	
2. Principal Place of Business 21		2a. Mailing Address 26		5. Certificate of Status Desired \$8.75 Additional Fee Required	
Suile, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State 23		City & State		7. Is this nonprofit corporation a homeowners association?	
7 337	SS Country	29 33755	Country 30	8. This corporation owes or has paid the current year Intandible Personal Properly Tax due June 30.	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
1			B1 Namo		
SMILEY, JOSEPH 1201 NORTH BETTY LANE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
SUITE 415 CLEARWATER FL 34615			B3 There		
			84 City	FL 85 Zip Code 33755	
11. Pursuant	to the provisions of Sections 647,0502	and 617.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose of changing its registered	
agent La	registered agent, or both, in the State of m familiar with, and accept the obliga	of Florida, Such change was a lions of, Section 617.0503, Flor	uthorized by the corporat rida Statutes.	tion's board of directors. I horeby accept the appointment as registered	
	Support we appeal or per technics of \mathbb{C}^4 was been funger	and the second second	Registered Agent signature requir		
12.	OFFICERS AND	DITTE CTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SMILEY, JOSEPH	L, J DITTELL	1.1 10 LF	C Crange C Adollor	
NAME	1201 N BETTY LANE		1.2 NAME 1.3 STRELT ADDRESS		
STREET ADDRESS	CLEARWATER FL				
CITY - ST - ZIP TITLE	D D	DELETE	1.4 CHY-ST-ZIP 2.1 THLE	Change Addition	
NAME	DIXON, BERNARD	L., Ollivia	2.2 NAME	L Straige L Alabama	
	11204 GORDA CIR.		2.2 NAME 2.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	LARGO FL		2 4 City-St-7iP		
THE	D	DELFIE	3 1 TILLE	Change Addition	
NAME	ROJAS, LARRY		3 2 NAMI	New Contract Section (1997)	
STREET ADDRESS	P O BOX 546 N/A		3 3 STREET ADDRESS		
CITY-ST-7IP	CLEARWATER FL 34615		3 4. CITY - S1 - ZIP		
TITLE	D	DELETE	4.1 TITLE	Change Addition	
NAME	VALMA, MARGARETTE		4. 2 NAME		
STHEET ADORESS	1001 CARLTON ST		4.3 STREET ADDRESS		
City-St-7iP	CLEARWATER FL 34615		4.4 CITY - ST - ZIP		
TITLE	Ď	T DELLE	5 1 1HUF	Change Addition	
NAME	PITTS, LUCIUS		5 2 NAME		
STREET ADDRESS	1325 SPRINGDALE STREET		5.3 STREET ADDRESS		
CITY-ST ZIP	CLEARWATER FL		5.4 CITY-ST-ZIP		
TITLE		DECEN	61 MLF	Change Addition	
NAME			6.2 NAME		

14. 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 annual report or suppliemental minual 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 trestee 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

63 STREET ADDRESS 64 DITY - ST- ZIP

SIGNATURE

STREET ADDRESS

Line the Smily, Chair

2/10/98

Daytime Phone # 0052432

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