2.3.98 B 2.175 NC 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 # N93000005765 (3)

TAMPA BAY FRIENDS FOR LIFE EDUCATION FUND, INC.

FILED Mar 03 1998 8:00am Secretary of State

Principal Place	of Business	Mailing Address						
C/O 3706 W PALMIRA AVE TAMPA FL 33629 US		% 3706 W PALMIRA AVE TAMPA FL 33629 US			3. Date Incorporated or Qualified 12/27/1993 4. FEI Number	- I IAr	oplied For	
						59-3221695		t Applicable
2. Principal Place of Business 21		2a. Mailing Address				5. Certificate of Status Desired	\$8.75 / Fee Re	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00	May Be	
City & State		City & State				Trust Fund Contribution Added to Fees		
23		28			7. Is this nonprofit corporation a homeowners association? Yes No			
Zip Country		Zip	├── ,			This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	9. Name and Address of Curre	nt Registered Agent	1301			10. Name and Address of New Regi		<u></u>
	<u> </u>		81	Name	0			
MICHELLE G CASTILLO			8:	2 Stree	t Addre	dress (P.O. Box Number is Not Acceptable)		
C/O 3706 W PALMIRA AVE TAMPA FL 33629			8:	3				
			84	City			85 Zip	Code
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statul	tes, the abo	ve-name	d corpo	vation submits this statement for the pur		s registered
office or re agent. I a	egistered agent, or both, in the State in familiar with, and accept the obliq	e of Florida. Such change was gations of, Section 617.0503, Fl	authorized b orida Statute	y the co es.	orporatio	oration submits this statement for the pur on's board of directors. I hereby accept	the appointment as	registered
SIGNATURE .	Signature, typed or printed name of registered as	AIO	E. Danislaved A	nont signati	ura raguira	d when reinstating)	DATE	
12.		ND DIRECTORS	13.	Jenn ergmann	ne reduied	ADDITIONS/CHANGES TO OFFICE		RS IN 12
TITLE	PD	DELETE	1.1 TITLE	1.1 TITLE			Change	Addition
NAME	Corral, Suzan		1.2 NAME	1.2 NAME				
STREET ADDRESS	803 LOWERY LANE		1.3 STRE	ET ADDRESS	s			
CITY-ST-ZIP	TAMPA FL	- December 1	1.4 CITY-				D Channe	Addition
TITLE	VOSD	☐ DELETE	•	2.1 TITLE		•	L_ Change	☐ Addition
NAME	O' TO TIESDY THIND I ELECT O		2.2 NAME	_			-	
STREET ADDRESS	3708 W PALMIRA AVE TAMPA FL			ET ADDRESS	5	·		
CITY-ST-ZIP TITLE	TD	DELETE	2. 4 CITY 3.1 TITLE	_	 		Change	Addition
NAME	HOLT, RITA		3.2 NAME				•	_
STREET ADDRESS	8444 BOXWOOD DR			et address	s			
CITY-ST-ZIP	TAMPA FL		3.4. CITY					
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAM	E				
STREET ADDRESS	*		4.3 STRE	ET ADDRESS	s			
CITY-ST-ZIP			4.4 CITY	4.4 CITY - ST - ZIP				
TITLE		DELETE	5.1 TITLE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAMI					
STREET ADDRESS				et address	S			
CITY-ST-ZIP		DE: 275	5.4 CITY				Change	Addition
TITLE		☐ DELETE	6.1 TITLE				L Change	L. AGUIION
NAME			6.2 NAM					
STREET ADDRESS			■ 6.3 STRE	FY ADDRESS	S I			

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 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:

2/22/98 813-831-5988