FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # N9400002296 (1)

ST. PETERSBURG PROSTATE CANCER AWARENESS GROUP, INC.

Mailing Address

DR BRYANT'S OFFICE		DR BRYANT'S OFFICE				3. Date Incorporated or Qualified 05/09/1994
ST. PETERSBU	JRG FL 33701	ST. PETERSBURG FL 33701 US				4. FEI Number Applied For
00		00				59-3242761 Not Applicable
2. Principal 21	Place of Business	2a. Mailing Address 26				Certificate of Status Desired S8.75 Additional Fee Required
Sulte, Ap	. #, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be
22		27				Trust Fund Contribution Added to Fees
City & Sta	ate	City & State	City & State			7. Is this nonprofit corporation a homeowners association? Yes Yes
Zip	Country Zip Country			8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren	t Registered Agent		61	Name	10. Name and Address of New Registered Agent
*****					1401116	
	i, Kënneth R 1 st south			82	Street	Address (P.O. Box Number is Not Acceptable)
	ersburg fl 33701			83		4
				84	City	85 Zip Code
11. Pursuan	t to the provisions of Sections 617.050:	2 and 617,1508. Florida Statu	ites, the at	DOVE	-named	corporation submits this statement for the purpose of changing its registered
 office or 	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was	authorized	d by	the cord	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE						
1	Signature, typed or printed name of registered ager			1 Age	ni sig∩ature	required when reinstating) DATE
12.	OFFICERS AND	DELETE	13.	74 -		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	BRYANT, KENNETH R MD	₩ DELEGE	1.1 TII		1	☐ Change ☐ Addition
NAME	A454 10511 A5 41 A5 A		12 N/			
STREET ADDRESS	ST PETERSBURG FL				ADDRESS	
CITY-ST-ZIP	VPD	DELETE		1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	FAYE, PETER	CJ OLCCIE		2.2 NAME		C Ondrigo C Addition
STREET ADDRESS	7407 SUNSET WAY				ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL			2.4 CITY-S		
TITLE	SD SD	DELETE	_	3.1 TITLE		Change Addition
NAME	BARGENT	- 	32 NA	3.2 NAME		
STREET ADDRESS	1200 MUROCK WAY S			3.3 STREET		
CITY-ST-ZIP	ST PETERSBURG FL			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 Til			☐ Change ☐ Addition
NAME	1		4.2 N	AME		
STREET ADDRESS			4.3 ST	REET	ADDRESS	
CITY-ST-ZIP	<u> </u>		4.4 CI	1Y-S	F-ZIP	
TITLE		DELETE	5.1 717	ILE		Change Addition
NAME			5.2 NA	ME	ļ	
STREET ADDRESS			5.3 ST	REET	ADDRESS	
CITY-ST-ZIP		··	5.4 CI	TY - S1	r-zip_	
TOTLE		DELETE	6.1 TIT	LE		Change Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET .	ADDRESS	
CITY-ST-ZIP			6.4 CI			
Indicated officer or	t on this annual report or supplemental	I annual report is true and acc ever or trustee empowered to	curate and	i tha	at my sica	od in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an required by Chapter 617, Florida Statutes; and that my name appears in

IGNATURE: James & Smot Kenetz R- Garat Tidge (813) 824 74

CR2E037 (10/97)

FILED

Feb 10 1998 8:00am

Secretary of State