2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **N94000002717** May 03, 2000 8:00 am 1. Entity Name **Secretary of State** THE ARTS COUNCIL OF TYRONE, INC. 05-03-2000 90147 022 ****61.25 Principal Place of Business Mailing Address 6421 22ND AVENUE NORTH 6421 22ND AVENUE NORTH ST PETERSBURG FL 33710 ST PETERSBURG FL 33710-4001 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BROWN, MARSHALL L 2630 QUEEN STREET SOUTH ST. PETERSBURGH FL 33712 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. And the first of the second SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. MARGARET S. READING Change Addition TITLE Delete TITLE CALHOUN, LANNY O NAME NAME STREET ADDRESS STREET ADDRESS 6800 31ST AVENUE SOUTH CITY-ST-ZIP CITY-ST-ZIP T PETERSBURG, FL ST. PETERSBURG FL 33710 Addition Delete TITLE TITLE WALKER, COLLEEN M NAME NAME STREET ADDRESS STREET ADDRESS 5250 50TH AVENUE NORTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33710 - ----■ Addition ☐ Delete NORMA LANDIS Change TITLE TITI F READING, MARGARET S 3320 491H ST NO. NAME NAME STREET ADDRESS STREET ADDRESS 2360 62ND STREET NORTH STPETERSBUTG, FL 33710 CITY-ST-ZIE CITY-ST-ZIP ST. PETERSBURG FL 33710 TITLE ☐ Delete TITLE TRAUSCHT, PETER SR NAME NAME STREET ADDRESS 6101 33RD AVENUE NORTH STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33710 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition CLARK, LINDA 6474 28TH AVENUE NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33710 TITLE ☐ Delete ☐ Change ☐ Addition BROWN, MARSHALL L NAME NAME STREET ADDRESS 2630 QUEEN STREET NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33712 12. 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 report or supplemental 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 10 or Block 11 if

GIGNATURE: STANDED OF SOUTH NAME OF SIGNING OFFICE OF DIESTOR TEAUSCHTSK 4/11/00 344-16

changed, or on an attachment with an address, with all of