FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N94000002761 (4)

GRAHAM-ROGALL RESIDENT MANAGEMENT CORPORATION

Principal Place of Business Mailing Address 300 10TH ST. SOTUH 300 10TH ST. SOTUH **ROOM 232 ROOM 232** ST. PETERSBURG FL 33705 ST. PETERSBURG FL 33705 Date incorporated or Qualified 06/02/1994 3a. Date of Last Report 03/20/1995 2. Principal Place of Business 21 325 - 9¹² 57, 50. 2a. Mailing Address Applied For 59-3253407 26 Not Applicable Suite, Apt. #, etc Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees $Z_{\rm ID}$ Country 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WEITZEL, THEODORE **B2** Street Address (P.O. Box Number is Not Acceptable) 300 TENTH STREET SOUTH **ROOM 232** 83 ST. PETERSBURG FL 33705 84 City Zip Code 85 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 Fiorida 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, typical or printed name of registered agent and title if apply able (NOTE Progratured Agent signature required when reinstating-(12/95)12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition WEITZEL, THEODORE NAME 1.2 NAME CR2E037 300 TENTH STREET, SOUTH STREET ADDRESS 13 STREET ADDRESS ST. PETERSBURG FL CITY - ST - ZIP 1 4 CITY - ST - ZIP TITLE DELETE 2.1 To Tue ☐ Change Addition GAGNON, ANDREE NAME 2.2 NAME 300 TENTH STREET, SOUTH STREET ADDRESS 2.3 STHEET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 2 4 CITY - \$1 - ZIP TITLE DELETE 3 1 HILE Change Addition FISH, BARBARA FISK, BARBARA NAME 3.2 NAME 300 TENTH STREET, SOUTH STREET ADDRESS 3.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 3.4 C-TY-ST-ZIP TITLE DELETE 4 1 TITLE ☐ Change Addition CAMPBELL, WILLIAM T. NAME 4 2 NAME 305 NINTH STREET, SOUTH, #1214 STREET ADDRESS 4.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 4.4 Cify-ST ZiP TITLE DELETE 51 THILE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST- ZIP 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THEODOKE E. IN BITZE

813-821-2228