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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000002782 (0)

1. Corporation Name

SAFETY HARBOR DOWNTOWN BUSINESS ASSOCIATION, INC



Principal Place of Business

630 SECOND STREET, SOUTH
SAFETY HARBOR FL 34695

Mailing Address

P. O. BOX 585
SAFETY HARBOR FL 34695

3. Date Incorporated or Qualified
05/31/1994

3a. Date of Last Report
08/23/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WELDON, ROBERT M C.P.A.
101 MAIN STREET
SUITE B
SAFETY HARBOR FL 34695

81

Name

FLOYD EGNER

82

Street Address (P.O. Box Number is Not Acceptable)

630 Second St. S.

83

84

City

Safety Harbor

FL

85 Zip Code

34695

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 Florida. 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

Signature of registered agent or printed name of registered agent and title if applicable.

FLOYD E. EGNER III

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ~~PD~~ ☒ DELETE

NAME SUBY, GUE

STREET ADDRESS 926 PHILIP PARKWAY

CITY-ST-ZIP SAFETY HARBOR FL 34695

TITLE ~~PD~~ ☐ DELETE

NAME PERSALL, CHERYL

STREET ADDRESS 580 7TH STREET SOUTH

CITY-ST-ZIP SAFETY HARBOR FL 34695

TITLE ~~PD~~ ☒ DELETE

NAME PATRINO, SAM

STREET ADDRESS 1091 MCCARTHY STREET

CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PRESIDENT/DIRECTOR ☒ Change ☐ Addition

TREASURER/DIRECTOR ☒ Change ☐ Addition

FLOYD EGNER

630 Second St. S.

Safety Harbor FL 34695

VICE PRESIDENT/DIRECTOR ☐ Change ☒ Addition

JOHN WHEELER

980 MAIN ST.

SAFETY HARBOR FL 34695

SECRETARY/DIRECTOR ☐ Change ☒ Addition

CHERYL SANTUCCI

609 MAIN ST.

SAFETY HARBOR FL 34695

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FLOYD E. EGNER III

TREASURER

DATE

4/26/96

Daytime Phone #

813/725-5215

CR2E037 (12/95)