NONPROFIT CORPORATION ANNUAL REPORT



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

1996

N9400003920 (5) **DOCUMENT #**1. Corporation Name

22ND STREET REDEVELOPMENT, INC.

Principal Place of Business Mailing Address						#8
2022 MELROSE AVE S ST PETERSBURG FL 33712 ST PETERSBURG FL 33712			712			
					3. Date Incorporated or Qualified 08/05/1994	3a. Date of Last Report 05/01/1995
2. Principal Pla	nce of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3307187	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip			Country		8. This corporation has liability for intangible tax under s. 199.032,	
24	25 29 30		30	Florida Statutes 🔲 Yes 💢 No		
					10. Name and Address of New I	Registered Agent
		١	, 81	Name		
BRINKLEY, COLUMBUS 2022 MELROSE AVE S		•	82	Street A	Address (P.O. Box Number is Not Acceptal	ble)
	RSBURG FL 33712		83			
			84	City		85 Zip Code
44 D	About 100 - 100 - 017 0500			<u> </u>		FL!
or registere	o the provisions of Sections 617.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	la. Such change was authorize	s, the above-i d by the corp	named cor oration's t	rporation submits this statement for the pu poard of directors. I hereby accept the app	rpose of changing its registered office pointment as registered agent. I am
SIGNATURE	n, and doespt the obligations of, decti	on 617.0000, Florida Statutes.				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent sign					oured when reinstating)	DATE
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO OF	ICERS AND DIRECTORS IN 12
TITLE	D	□ DELETE	11 TITLE		P/D	Crange X Addition
NAME	DIX, ANNIE M		1.2 NAME		Poix, Annie M.	<u>-</u>
STREET ADDRESS			1 3 STREET	ADDRESS	•	
CITY-ST-ZIP			1.4 CITY - 9	IT-ZIP		
TITLE	D	DELETE	2 1 TITLE		V/D	Change 🔀 Addition
NAME	HARDY, JASPER L		2 S NAME		Hardy Jasper L. Denage Addition T/D Change Addition Forter, Alvin Jr.	
STREET ADDRESS	1324 18TH AVE S		23 STREET	ADDRESS	war of y	
CITY - ST - ZIP	ST PETERSBURG FL 33705	C DELETE	2 4 CiTY-	ST-ZIP		
TITLE	D DOOTED MANAGE	DEFELE	3 1 TITLE	ľ	7/D 1 1/2 1/2 1	Change X Addition
NAME	PORTER, ALVIN JR		3.2 NAME		Porter, MUINN	V1
STREET ADDRESS	710 26TH AVE S		3 3 STREET	ADDRESS	10.	
CITY-ST-ZIP TITLE	ST PETERSBURG FL 33705	DELETE	34 CITY-:	ST - ZiP		
NAME	D DCILAMY LOTTIC	Office	4 1 TITLE			☐ Change ☐ Addition
STREET ADDRESS	BELLAMY, LOTTIE		4 2 NAME			
CITY-ST-ZIP	2225 18TH ST S ST PETERSBURG FL 33712		4.3 STREET			
TITLE	D	DELETE	4.4 CITY - S 5 1 TITLE	1 - 2112	<u>c h</u>	, ☐Change ☐ Addition
NAME	BRINKLEY, COLUMBUS		5.2 NAME		Spinkley, Colum	LIA 6
STREET ADDRESS	2022 MELROSE AVE S		5.2 NAME 5.3 STREET	Annaged	Brinney) Our	n Pus
CITY-ST-ZIP	ST PETERSBURG FL 33712		5 4 CITY - S		-	
TITLE	VITE LENOBORO IL 33/12	DELETE	6 1 TITLE	01-70		Change Addition
NAME			6 2 NAME			change contoil
STREET ADDRESS			6 3 STREET	ADDRESS		
CITY-ST-ZIP			6 4 CITY - S			
	cortify that the information supplied y	ith this files is at their force	0.4 (1111-3	11.77.	f feether	

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: Columbus Bendle SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 29, 1996

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