

FILE NOW: FILING FEE IS \$61.25

FILED
May 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N94000003920 (5)

1. Corporation Name
22ND STREET REDEVELOPMENT, INC.



Principal Place of Business: 2022 MELROSE AVE S, ST PETERSBURG FL 33712
Mailing Address: 2022 MELROSE AVE S, ST PETERSBURG FL 33712-2732

3. Date Incorporated or Qualified: 08/05/1994
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number: 59-3307187		Applied For: <input type="checkbox"/> Not Applicable	
21		26		5. Certificate of Status Desired: <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>		\$5.00 May Be Added to Fees	
23. City & State		28. City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
24. Zip		25. Country		29. Zip		30. Country	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRINKLEY, COLUMBUS
2022 MELROSE AVE S
ST PETERSBURG FL 33712

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL
85. Zip Code	

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIX, ANNIE M		1.2 NAME		
STREET ADDRESS	2161 14TH AVE S		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		1.4 CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARDY, JASPER L		2.2 NAME	Howard, Annette	
STREET ADDRESS	1324 18TH AVE S		2.3 STREET ADDRESS	1511- 22nd Street South-Apt. # 5	
CITY-ST-ZIP	ST PETERSBURG FL		2.4 CITY-ST-ZIP	St. Petersburg, FL 33712	
TITLE	TD	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PORTER, ALVIN JR		3.2 NAME		
STREET ADDRESS	710 28TH AVE S		3.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		3.4 CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRINKLEY, COLUMBUS		4.2 NAME		
STREET ADDRESS	2022 MELROSE AVE S		4.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		4.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ Cloumbus G. Brinkley

CR2E037 (9/96)