FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000001428 (0)

AUGUSTINE HOUSE, INC.

Principal Plac	e of Business	Mailing Address			L LEDYHOL BYG TOIGH DINLE DONN GANY	BBINL BBULL ERVE	1 11814 B1010 1	10 6 1 1011 1001		
831 26TH AVE. N. ST. PETERSBURG FL 33704		631 26TH AVE. N. ST. PETERSBURG FL 33704-2831								
						3. Date Incorporated or Qualified 03/24/1995		e of Last R 2/26/19 9		
	lace of Business	2a. Mailing Address			4. FEI Number 59-3311226			plied For		
21 Suite, Apt. #, etc.		26			Certificate of Status Desired		\$8.75 A			
City & State		City & State			6. Election Campaign Financing		\$5.00	<u> </u>		
23		28			Trust Fund Contribution		Added t			
Zip	Country Zip Co. 25 29 30			У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
24	25 29 30 30 9. Name and Address of Current Registered Agent				Florida Statutes					
			81	Namo)					
BRIDGEFORD, PAUL 631 28TH AVE N			82	Street	t Addre	ress (P.O. Box Number is Not Acceptable)				
	RSBURG FL 33704		83	7						
			84	City	 -		FL	85 Zip (Code	
11. Pursuant	to the provisions of Sections 617.0502	and 617,1508, Florida Statutes	s, the above	re-named	d corpo	ration submits this statement for the party board of directors. I hereby acce	ourpose of o	hanging it	s registered	
_	egistered agent, or both, in the State on familiar with, and accept the obligat	ions of, Section 617.0503, Flor	ida Statuto	es.	.,,		pi ma appo			
SIGNATURE .	Signature, typed or printed name of registered agent	and tale if applicable. (NOTE	Registered Ag	gent s-gnatur	re required	when reinstaling)	DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 12	
TITLE	P	☐ DELETE	1.1 TITLE				1	Change	Addition	
NAME	BRIDGEFORD, PAUL		1.2 NAME		1					
STREET ADDRESS CITY-ST-ZIP	631 28THA VE N ST PETERSBURG FL		1.3 STREE	T ADDRESS	}					
TITLE	S S	DELETE	2.1 TITLE	31- <i>21</i>	╅			Change	Addition	
NAME	SWEENEY, DON		2.2 NAME		ļ			_		
STREET ADDRESS	3350 ULMERTON RD SUITE 10		2.3 STREE	T ADDRESS	1				1	
CITY-ST-ZIP	CLEARWATER FL		2. 4 CITY	-ST-ZIP	.\					
TITLE	Ţ	DELETE	3.1 TITLE				ı	☐ Change	Addition	
NAME STREET ADDRESS	GRATZOL, KURT		3.2 NAME		1				l	
CITY-ST-ZIP	417 12TH AVE N INDIAN ROCKS BEACH FL		3.3 STREE	T ADDRESS	1					
TITLE	D	☐ DELETE	4.1 TITLE	V1 - EII			<u>_</u>	Change	Addition	
NAME	TETREAULT, VIC		4. 2 NAME		1					
STREET ADDRESS	683 ISLAND WAY		4.3 STREE	T ADDRESS			•			
CITY-ST-ZIP	CLEAWATER FL	——————————————————————————————————————	4.4 CITY-		 		_			
TITLE	D	☐ DELETE	5 1 TITLE		1		L	Change	Addition	
NAME STORES ADDRESS	WAHKING, HAROLD		5.2 NAME		1					
STREET ADDRESS	112 70TH ST S ST PETERSBURG FL		5.3 STREE	T ADDRESS	}		,	1	1	
TITLE	D D	DELETE	6.1 TITLE	01 · ZII	 			Change	Addition	
NAME	NERI, BOB		6.2 NAME		1					
STREET ADDRESS	6822 22ND AVE N		6.3 STREE	T ADDRESS		, · ·		•		
CITY-ST-ZIP	ST PETERSBURG FL		6.4 CITY-			<u> </u>				
l Informatio	by certify that the information supplied in indicated on this annual report or su	oplemental annual report is tru	ie and acc	urate an	id that n	ny signature shall have the same leg:	al effect as i	f made und	der oath: that l	
i am an oi appears i	fficer or director of the corporation or to n Block 12 or Block 13 if changed, or o	peruceiver or trustee empowe or an attachment with an addr	red to exe ess.	cute this	report	as required by Chapter 617, Florida 9	Statutes; and	that my n	ame	

SIGNATURE:

Dileta Victor A Telegrif

16197 VIV.0360

FILED

Apr 28 1997 8:00am

Secretary of State