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FILED

Feb 21 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS**DOCUMENT # N95000001506 (3)**

1. Corporation Name

THE CLIO FOUNDATION, INC.



Principal Place of Business

Mailing Address

6061 SECOND ST., E.  
#42  
ST PETERSBURG BEACH FL 337066061 SECOND ST., E.  
#42  
ST PETERSBURG BEACH FL 33706-3708

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/29/1995

3a. Date of Last Report

03/05/1996

4. FEI Number

59-3316655

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐ \$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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 provisions of Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME BUCKLEY, JANET  
STREET ADDRESS 1507 CAROLINA AVE., S.  
CITY-ST-ZIP TAMPA FL 33629 ☐ DELETETITLE D  
NAME COLLINGWOOD, SANDRA  
STREET ADDRESS 3665 EAST BAY DR. #204-140  
CITY-ST-ZIP LARGO FL 34641 ☐ DELETETITLE D  
NAME NEAL, SUNNY  
STREET ADDRESS 2001 BEACH DR. S.E.  
CITY-ST-ZIP ST PETERSBURG FL 33705 ☐ DELETETITLE D  
NAME MENZ, ANNA  
STREET ADDRESS 241-13 ST. N.  
CITY-ST-ZIP ST PETERSBURG FL 33705 ☐ DELETETITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Secretary:  
1.2 NAME JOAN SCHELL  
1.3 STREET ADDRESS 425-18th AVE., NE  
1.4 CITY-ST-ZIP ST. PETERSBURG, FL 33704 ☐ Change ☒ Addition2.1 TITLE Treasurer:  
2.2 NAME PAT RINGAN  
2.3 STREET ADDRESS 6061 2nd ST., E., #42  
2.4 CITY-ST-ZIP ST. PETERSBURG, FL 33706 ☐ Change ☐ Addition3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/97

Date

813-367-5760

Daytime Phone # 0050174

CR2E037 (9/96)