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NONPROFIT CORPORATION ANNUAL REPORT



appears in Block 12 or Block 13 if changed, or en an attachment with an address

FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

Principal Place of Business

7262 MOFFATT LN N

N95000002920 (5)

Mailing Address
7262 MOFFATT LN N

TAMPA BAY POETRY FOUNDATION INC.

PINELLAS PARK FL 33781-4827 PINELLAS PARK FL 34665 Date Incorporated or Qualified 06/20/1995 3a. Date of Last Report 02/23/1996 4. FEI Number 59-3321034 Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional М 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Zip Country Zip Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WILLIAMS, ROY E Street Address (P.O. Box Number is Not Acceptable) 7262 MOFFATT LN N 83 PINELLAS PARK FL 34665 City Zip Code 85 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 lamiliar with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE TITLE 1.1 TITLE FICHTL, ELIZABETH? 1.2 NAME NAME 6141 42ND AVENUE NORTH STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE 21 TITLE TITLE PALMENTERI, ESTHER 2.2 NAME NAME 1365 MISSION CIR 2.3 STREET ADDRESS STREET ADDRESS CLEARWATER FL DITY-ST-71P 2. 4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE WILLIAMS, MARY P 3.2 NAME NAME 7262 MOFFATT LANE N STREET ADDRESS 3.3 STREET ADDRESS PINELLAS PARK FL 3.4. CITY-ST-ZIP CHTY-ST-ZIP DOARLOCK, JOANNA DELETE Addition 4.1 TITLE TITLE 1828 LAUREL RD CARLOCK, JOANNA H 4.2 NAME NAME 5611 SIR GARETH B'HAM, AL 35216 4.3 STREET ADDRESS STREET ADORESS SAN ANTONIO TX 4.4 City-ST-ZiP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE WILLIAMS, ROY E NAME 5.2 NAME 7262 MOFFATT LANE NORTH **5.3 STREET ADDRESS** STREET ADDRESS PINELLAS PARK FL 5.4 CITY - ST - ZIP DITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE WILLIAMS, JAMES R 6.2 NAME NAME 503 STONYBROOKE LN STREET ADDRESS **6.3 STREET ADDRESS FULTONDALE AL 35068** 6.4 CITY-ST-ZIP 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 eath; 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