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Apr 06, 1999 8:00 am
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04-06-1999 90049 041 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N95000003519

1. Corporation Name

BRANDON BAR ASSOCIATION, INC.

Principal Place of Business

101 E. LUMSDEN RD.
 BRADON FL 33511
 US

Mailing Address

101 E. LUMSDEN RD.
 BRANDON FL 33511
 US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		07/24/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3392778	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip		Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
24	25	29	30	\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
SUBRA, SHAMILA 915 OAKFIELD DR. STE. F BRANDON FL 33511				81	Name			CAROLINE ADAMS
				82	Street Address (P.O. Box Number is Not Acceptable)			213 Providence Road
				83				
				84	City		FL	85
Brandon				33511				

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PILKA, DANIEL F.	1.2 NAME	Glen A. LANSKY
STREET ADDRESS	213 PROVIDENCE RD.	1.3 STREET ADDRESS	915 OAKFIELD DRIVE, suite F
CITY-ST-ZIP	BRANDON FL 33511	1.4 CITY-ST-ZIP	Brandon, FL 33511
TITLE	SD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	VPO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BROWN, WHITNEY	2.2 NAME	TERESA WIGGINSTON
STREET ADDRESS	915 OAKFIELD DRIVE STE F	2.3 STREET ADDRESS	116 LINDA PINECREST RD
CITY-ST-ZIP	BRANDON FL 33511	2.4 CITY-ST-ZIP	Brandon, FL 33511
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GILL, THOMAS P. J.	3.2 NAME	CAROLINE ADAMS
STREET ADDRESS	207 E. ROBERTSON ST., STE. B	3.3 STREET ADDRESS	213 PROVIDENCE ROAD
CITY-ST-ZIP	BRANDON FL 33511	3.4 CITY-ST-ZIP	BRANDON FL 33511
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		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 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3180799 681-2612
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2F037 (4/1/98)