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2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED
May 03, 2004 08:00 AM
Secretary of State

DOC	IMENT	# N95000004417	
		# 140000000 1 1 1 1	

1. Entity Name

PINELLAS COUNCIL ON ADOPTABLE CHILDREN, INC.



Principal Place of Business

Mailing Address

3861 38TH ST SO ST. PETERSBURG, FL 33711 US

3861 38TH ST SO

ST. PETERSBURG, FL 33711

US



04272004 No Chg-NP

CR2E037 (10/03)

4.	FEI Number	
	59-3356708	

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Name and	Address of	Current Re	pistered	Agent

WILLIAMS, STEPHEN 3861 38TH ST SOUTH ST PETERSBURG, FL 33711

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8. The above the obligat	named entity submits this statement for the pulions of registered agent.	urpose of changing its registered	office or n	egistered agent, or bol	th, in the State of Florida. I am familiar with, and accept			
SIGNATURE	NATURE							
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financ Trust Fund Contribution,	ing 🔲	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MILES, HAZEL 2446 ERIE STREET SOUTH ST PETERSBURG, FL 33712							
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD DENNIE, BRENDA 2201 DESOTO WAY SOUTH ST PETERSBURG, FL 33712				U00000149820 05/03/04-80202-013 61.25			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WILLIAMS, STEPHEN 3861 38TH ST SO ST. PETERSBURG, FL 33711			DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBINSON, JOYCE 5899 7TH STREET SOUTH SAINT PETERSBURG, FL 33705			IN '	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD WILLIAMS, TERESA G 3861 38TH ST. SOUTH SAINT PETERSBURG, FL 33711				- · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. Thereby:	certify that the information supplied with this fill	ing does not qualify for the exem	notion state	d in Section 119.07(3)	(i), Florida Statutes. I further certify that the information			

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I turnier certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Torso ALL Quand Director

4/27/04 727-866-8963