FILE NOW: FILING FEE IS \$61.25

Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000004795 (9) 1. Corporation Name

COURTWATCH OF HILLSBOROUGH COUNTY, INC.

TAMPA FL 33606		TAMPA FL 33606-1759				
					3. Date Incorporated or Qualified 10/10/1995	3a. Date of Last Report 06/19/1996
2. Principal Place of Business		2e, Mailing Address		4. FEI Number APPLIED FOR 59	-3380200Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	28 Zip	Cour	ntrv	Trust Fund Contribution 8. This corporation has liability for i	Added to Fees
24]	25	29	30	,		Yes 🔯 No
	9. Name and Address of Curren		1001		10. Name and Address of New Re	
		.,		81 Name		
MUGA, F	RICHARD D		-	82 Street Ado	dress (P.O. Box Number is Not Acceptab	le)
2110 W	PLATT ST			oli cot ride		,,,,
TAMPA F	FL 33606		ſ	83		
			-	84 City		85 Zip Code
						FL
office or re	to the provisions of Sections 617.050. egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was	authorized	by the corpora	poration submits this statement for the pation's board of directors. I hereby accept	ourpose of changing its registered at the appointment as registered
SIGNATURE _						
	Signature, typed or printed name of registered age			Agent signature requ	vired when reinstating)	DATE
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	DP DEAL CATHEDINE W	☐ DELETE	1.4 141			Change Addition
NAME OTOTET ADDRESS	REAL, CATHERINE W 2110 W PLATT ST		1.P. NAI			
STREET ADDRESS	TAMPA FL 33606			REET ADDRESS		
CITY-ST-ZIP TITLE	DV DV	DELETE 2.1 TI		Y-ST-ZIP		☐ Change ☐ Addition
NAME	MUGA, RICHARD D	22)				ontargo rounton
STREET ADDRESS	2110 W PLATT ST			REET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33606			TY-ST-ZIP		
TITLE	DST	DELETE 3.1				Change Additio
NAME	BAUMANN, JOHN P JR.		3.P NA	ME		- · · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	11210 NORTH DALE MABRY		3 9 STF	REET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33618		3.4. CI	TY-ST-ZIP		
TITLE		DELETE	4.4 10			☐ Change ☐ Addition
NAME			4. 2 NA	ME		-
STREET ADDRESS			4.B STE	REET ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP		
TITLE		DELETE	5 h TIT	LE	-	Change Addition
NAME			5 P NA	ME		
STREET ADDRESS			5.B STR	REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	6.1 TIT	LE		Change Addition
NAME			6.P. NA	ME		
STREET ADDRESS			6.B STR	REET ADDRESS		
0.00 00 300			64.07			

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 trusted 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.