

FILE NOW: FILING FEE IS \$61.25

FILED  
May 20 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000004918 (7)

1. Corporation Name

CANADIAN-AMERICAN INTERNATIONAL BUSINESS COUNCIL  
OF TAMPA BAY, INC.

Principal Place of Business

Mailing Address

3030 N. ROCKY POINT DR. W., STE. 280  
TAMPA FL 33607-5902

3030 N. ROCKY POINT DR. W., STE. 280  
TAMPA FL 33607-5902



3. Date Incorporated or Qualified

10/20/1995

4. FEI Number

65-0614569

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EKONOMIDES, NICKOLAS C  
201 N. FRANKLIN ST., STE. 2350  
TAMPA FL 33602

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 obligations 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME TONER, STEPHEN J  
STREET ADDRESS 3030 N. ROCKY POINT DR. W., STE. 280  
CITY-ST-ZIP TAMPA FL 33607-5902

1.1 TITLE D ☐ Change ☒ Addition

1.2 NAME Patrick Dugan  
1.3 STREET ADDRESS 455 Edgewater Drive  
1.4 CITY-ST-ZIP Dunedin, FL 34698

TITLE D ☒ DELETE

NAME GRIGGS, CATHY  
STREET ADDRESS 3050 REGENT BLVD, SUITE 300  
CITY-ST-ZIP IRVING TX

2.1 TITLE D ☐ Change ☒ Addition

2.2 NAME Andrew Csanady  
2.3 STREET ADDRESS 581 S. Duncan Avenue  
2.4 CITY-ST-ZIP Clearwater, FL 34616

TITLE D ☐ DELETE

NAME GODDARD, D. ANDREW  
STREET ADDRESS 401 E. JACKSON ST., STE. 2100  
CITY-ST-ZIP TAMPA FL 33602

3.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME EKONOMIDES, NICKOLAS  
STREET ADDRESS 201 N. FRANKLIN ST., STE. 2350  
CITY-ST-ZIP TAMPA FL 33602

4.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME EKONOMIDES, ANTHONY C  
STREET ADDRESS 201 N. FRANKLIN ST., STE. 2350  
CITY-ST-ZIP TAMPA FL 33602

5.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME BAUMGARTEN, STEVEN A  
STREET ADDRESS 4202 E FOWLER AVE., BSN 3403  
CITY-ST-ZIP TAMPA FL 00

6.1 TITLE ☐ Change ☐ Addition

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.

SIGNATURE:

*[Handwritten signatures]*

CR2E037 (1097)