1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9600001437

0550 : COMMUNITY INVOLVEMENT AND COMMITMENT CLUB OF TAMPA, INC.

Principal Place of Business 3909 E. CARACAS ST. TAMPA FL 33610-6627

2. Principal Place of Business

Suite, Apt. #, etc.

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Mailing Address

P.O. BOX 11067 TAMPA FL 33680-1067

2a. Mailing Address

Suite, Apt. #, etc.

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FILED May 03, 1999 8:00 am g Secretary of State

05-03-1999 90050 019 ****61.25



3. Date Incorporated or Qualifed

03/12/1996

59-3366018

FEI Number

City & State		City & State			5. Certifcate of Status De	sired	\$8.75 Additional Fee Required	
23		28						
Zip	Country 25	Zip 30	Country		Election Campaign Fir Trust Fund Contribution	-	\$5.00 N Added to	•
24	9. Name and Address of Current	 	<u>'</u>		10. Name and Address of		Agent	
	Hamo and Address of Contents		81	Name				
MARK BARATIN A								
YORK, DOROTHY C				Street	Address (P.O. Box Number is Not	Acceptable)		
3909 E. CARACAS ST.				<u> </u>				
TAMPA FL	. 33610-6627		83					
			84	City		FL.	85 Zip C	ode
11 Dureuant	to the provisions of Sections 617.0502	and 617 1508 Florida Statutes.	the above	-named	corporation submits this statemen	t for the purpose of	changing its r	egistered
office or r	egistered agent, or both, in the State of	Florida, Such change was auth	iorized by	tine corp	oration's board of directors. I here	by accept the appo	intment as reg	istered
agent. (a	m familiar with, and accept the obligation	ris oi, section 617.0303, Fiorida	a Statutes	•	•			
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	gistered Agen	nt signature r	equired when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES	TO OFFICERS AN	ID DIRECTOR	₹S IN 12
TITLE	D .	☑ DELETE			SIRMONS, ALICE	D.	Change	☐ Addition
NAME	PARKER, WILLIE L JR.		1.2 NAME		110 S. WESTLAN			
STREET ADDRESS	2613 CRESTFIELD DR.		1.3 STREET	ADDRESS		AMPA, FLORIDA 33606		
	/ALRICO FL 33594		14 CITY-ST-ZIP		TAMPA, FLORIDA	33000		
CITY-ST-ZIP	D	X DELETE	2.1 TITLE				Change Ch	Addition
NAME	FREENEY, MARY A		2.2 NAME		WANDA E. STARL			
				T ADDRESS	208½ MELVILLE		South	
STREET ADDRESS	TAMPA FL 33617	^	2.4 CITY-S		TAMPA, FLORIDA	33606		
TITLE	D	□ DELETE	3.1 TITLE	71- <u>2</u> 11			☐ Change	Addition
	DOSS, FRANCES B	5	3.2 NAME					
NAME	8744 BUSCH OAKS ST			T ADDRESS				
STREET ADDRESS	TAMPA FL 33617		3.4. CITY-S					
CITY-ST-ZIP	D	☐ DELETE	4.1 TITLE	51-ZH			Change	Addition
TITLE	• .		4. 2 NAME		-		_ •	_
NAME	ECCLES, ANNA L P.O. BOX 302		-	T ADDRESS				
STREET ADDRESS	THONOTOSASSA FL 33592		4.4 CITY-S					
CITY-ST-ZIP		DELETE	5.1 TITLE	1-21			☐ Change	Addition
TITLE	D VODE DODOTHY C	C) Deterie	5.2 NAME					_ _
NAME	YORK, DOROTHY C			T ADDRESS				
STREET ADDRESS	3909 E. CARACAS ST.		5.4 CITY-S					
CITY-ST-ZIP	TAMPA FL 33610-6627	X DELETE	6.1 TITLE	۱- و۱۰۰			Change	☐ Addition
mle	D	KN DECETE	6.2 NAME		PATRICIA L. HO	RDGE	yu	
NAME .	HAYES, ANTONIA A			T ADDRESS	2121 ARCH STREE			
STREET ADDRESS					TAMPA, FLORIDA	33607		
CITY-ST-ZIP	RIVERVIEW FL 33569		6.4 CITY-S				elife that the in	formation
14. I hereby	certify that the information supplied with	this filing does not qualify for the	ie exempt te and tha	ion stated t my sign	o in Section 119.07(3)(i), Florida S nature shall have the same legal e	tatutes. I furtner ce fect as if made und	ruly that the in ler oath; that I	am an

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it indoo under our 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: Dorothy @N & Jelic R Devota

Applied For

Not Applicable