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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N96000003743 (9)

Jan 27 1998 8:00am
Secretary of State

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CLEARWATER		CLEARWATER FL 34615			- 1	3.	07/16/19		α.	-	•	
1					ŀ	4.	FEI Number	30			Applied For	
							59-34110	171		·· -	Not Applica	
2. Principal P	Place of Business	2a. Mailing Address				_				\$8	75 Additional	
21		26				5. (Certificate of Sta	atus Desired			e Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		-		6.	Election Campa	ign Financing		\$5.0	00 May Be	
22		27					Trust Fund Cont				ed to Fees	
City & Stat	te	City & State				7. 1	Is this nonprofit	corporation a			iation?	
Zip	Country	28	Count	D/					☐ Yes	□ No		
24	25		30	ıy	-		This corporation Personal Proper		-	current yea	ir Intangible No	
24	9. Name and Address of Curre		<u> </u>				Name and Add				<u> </u>	_
			8	1 Name								
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	MYRTLE AVE		82	2 Stree	t Addres	s (P.0	O. Box Number	is Not Accept	table)			
	VATER FL 34615		83	3								
			8							11	T - 0 - 1	_
			84	4 City					F	L 85	Zip Code	
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statutes	, the abo	ve-name	d corpora	ation	submits this sta	atement for the	e purpose	of changi	ng its register	ed
agent. 1 a	to the provisions of Sections 617.05 registered agent, or both, in the Stat am familiar with, and accept the oblig	e or Florida. Such change was au gations of, Section 617.0503, Flori	tnorized t da Statute	ay the co es.	rporation	n's bo	oard of directors	s. I nereby acc	cept the a	ppointmen	it as registered	a
SIGNATURE .									_			
SIGNATURE.	Signature, typed or printed name of registered as		Registered A	gent signatu	re required v				DATE			_
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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 armuel 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 porporation 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.