

2002 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 31, 2002 8:00 am**
Secretary of State

01-31-2002 90016 016 ****61.25

DOCUMENT # N96000005481

1. Entity Name

CENTURY 21 TAMPA BAY COUNCIL, INC.

Principal Place of Business

Mailing Address

**7779 STARKEY RD
SEMINOLE FL 33777****7779 STARKEY RD
SEMINOLE FL 33777**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3410174

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RHODES, J NELSON
7779 STARKEY RD
SEMINOLE FL 33777**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	TRACY, MARILYN	33825 US 19 NORTH	PALM HARBOR FL 34684	PD	GERRE REYNOLDS	1913 - W. BRADON BLVD	BRANDON, FL 33511
SD	MEEK, PATTY	1211 COURT ST	CLEARWATER FL 34616	SD	LILLIAN LOBELLO	1517 OAK FIELD DR.	BRANDON, FL 33511
T	RHODES, NELSON	7779 STARKEY RD	SEMINOLE FL 33777	VD	JAMES TIBBY	5050 - GULF BLVD.	ST PETE BEACH, FL 33706
T	RHODES, HELEN	7779 STARKEY RD	SEMINOLE FL 33777				

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/14/02 727-398-7771

CR2E037 (9/01)