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Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000005847 (6)**

1. Corporation Name

CHILDS PARK YOUTH INITIATIVE COUNCIL, INC.

Principal Place of Business

**4719 22ND AVE S
ST PETERSBURG FL 33711**

Mailing Address

**4719 22ND AVE S
ST PETERSBURG FL 33711**

3. Date Incorporated or Qualified

11/12/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

21
Suite, Apt. #, etc.

2a. Mailing Address

26
Suite, Apt. #, etc.

City & State

23

Zip Country

24

25

City & State

27

Zip Country

28

30

9. Name and Address of Current Registered Agent

**DAVIS, PATRICIA S
4719 22ND AVE S
ST PETERSBURG FL 33711**

10. Name and Address of New Registered Agent

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

TITLE **CD** ☐ DELETE

NAME **LAMPLEY, DAPHNE**
STREET ADDRESS **642 61ST AVENUE SOUTH**
CITY-ST-ZIP **ST PETERSBURG FL 33705**

TITLE **VCD** ☐ DELETE

NAME **CRAWFORD, KENNETH**
STREET ADDRESS **300 43RD STREET SOUTH**
CITY-ST-ZIP **ST PETERSBURG FL 33711**

TITLE **TD** ☐ DELETE

NAME **STOKES, MARY A**
STREET ADDRESS **3879 15TH AVENUE SOUTH**
CITY-ST-ZIP **ST PETERSBURG FL 33711**

TITLE **SD** ☐ DELETE

NAME **GILSTRAP-ODOM, BRENDA**
STREET ADDRESS **2356 KINGSTON STREET**
CITY-ST-ZIP **ST PETERSBURG FL 33711**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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: **Daphne Lampley**

2/5/98

CR2E037 (10/97)