FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

T MANIKAN ANA NAMA ABUK ABUK ABUK BANTI SABIK BANTA ASIKA MINA MANA MANA TAN TAN TAN

Daytime Phone # 0000669

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name N96000006299 (9)

TAMPA BAY WOMEN IN CRIMINAL JUSTICE INC.

Principal Place of Business Mailing Address							
8131 140TH ST. N. SEMINOLE FL 33776		8131 140TH ST. N. SEMINOLE FL 33778-33	36				
1					3. Date Incorporated or Qualified 12/09/1996	3a. Date of Last F	Report
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address 26		4. FEI Number Applied For Not Applied be		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		
City & State		City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip			Count	ry	8. This corporation has liability for intangible tax under s. 199.032,		
24 25 29 3 9, Name and Address of Current Registered Agent			30		Florida Statutes Yes LYNo 10, Name and Address of New Registered Agent		
	9, Name and Addides of Co	miterit Lindieland Whent	8	1 Name	IV. Hame and Address of New Year	Ingraige village	
RASOR, CAROL E			-				
8131 140TH ST.			8	2 Street Ad	ddress (P.O. Box Number is Not Acceptab	le)	
	NOLE FL 33776		8	3			
			8	4 City		85 Zip	Code
						FL	
l office or r	registered agent, or both, in the	7.0502 and 617.1508, Florida Statut State of Florida. Such change was obligations of, Section 617.0503, Fl	authorized i	by the corpo	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of changing in the appointment as	ts registered registered
SIGNATURE				···			
12.	Signature, typed or printed name of register	red agent and little if applicable. (NOT S AND DIRECTORS	E: Registered A	gent eignature re	squired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDS AND DIRECTOR	DC IN 12
TITLE	PD	DELETE 1,11		Т	ADDITIONS/DIANALS TO SITE	Change	Addition
NAME			1.2 NAM	E			
STREET ADDRESS	8131 140TH ST.		1.3 STREET ADDRESS				
CITY-ST-ZIP			1.4 City	-ST-ZIP			
TITLE			2.1 TITLE			[] Change	Addition
NAME	• · · · · · · · · · · · · · · · · · ·		22 NAM	1			
STREET ADDRESS	AL ACHINIOLE DE AASTA		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP				
CITY-ST-ZIP	SD SD	DELETE	2. 4 GHV 3.1 TITLE			☐ Change	Addition
NAME	The second secon		3.2 NAM			_ •	,_
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	N. SEMINOLE FL 33776		3.4. CITY	-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	1		Change	Addition
NAME			4. 2 NAV				
STREET ADDRESS	1		1	ET ADDRESS			
CITY-ST-ZIP THILE			4.4 CITY 5.1 TITLE			Change	Addition
NAME			5.7 MAM	l l		- Simile	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		☐ D£LETE	6.1 TITLE			Change	Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STRE	ET ADDRESS			

6.4 CITY-ST-ZIP

14. I do 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.