

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER DECEMBER 31, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

98 NOV -5 AM 11:17

DOCUMENT # N97000002842 (9)

1. Corporation Name

TAMPA COLUMBUS CLUB ASSOCIATION INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

1707 W. CLIFTON ST.  
TAMPA FL 33603-1101

1707 W. CLIFTON ST.  
TAMPA FL 33603-1101

3. Date Incorporated or Qualified

05/14/1997

4. FEI Number

59-3263890

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REED, JAMES J  
1707 W. CLIFTON ST.  
TAMPA FL 33603-1101

81 Name

WATSON, GEORGE H. JR

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

1707 W. CLIFTON ST.

83

84 City

TAMPA

FL

85 Zip Code

33603-1101

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

9/22/98

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME REED, JAMES J  
STREET ADDRESS 5823 TAYWOOD DR.  
CITY-ST-ZIP TAMPA FL 33624

TITLE V ☒ DELETE

NAME POWER, ANDY  
STREET ADDRESS 508 NORTH HERCHEL DR.  
CITY-ST-ZIP TEMPLE TERRACE FL 33617

TITLE S ☐ DELETE

NAME BREEN, FRANK J  
STREET ADDRESS 4051 SHORESIDE CIRCLE  
CITY-ST-ZIP TAMPA FL 33624

TITLE T ☒ DELETE

NAME MEO, RICHARD C  
STREET ADDRESS 5301 RAINBOW DR.  
CITY-ST-ZIP TAMPA FL 33617

TITLE D ☐ DELETE

NAME WIESEN, HURBERT J  
STREET ADDRESS 3303 PICWOOD RD.  
CITY-ST-ZIP TAMPA FL 33618

TITLE D ☐ DELETE

NAME PEREZ, EMILIO JR.  
STREET ADDRESS 15106 ELMCREST  
CITY-ST-ZIP ODESSA FL 33556

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME WATSON, GEORGE H. JR  
1.3 STREET ADDRESS 9906 SW FREDERICK ST  
1.4 CITY-ST-ZIP TAMPA, FL 33627

2.1 TITLE V ☒ Change ☐ Addition

2.2 NAME SCULTHORPE, GEORGE  
2.3 STREET ADDRESS 2716 W. JETTON AVE.  
2.4 CITY-ST-ZIP TAMPA FL 33629

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME 200002684872--9  
3.3 STREET ADDRESS -11/10/98-01085-015  
3.4 CITY-ST-ZIP \*\*\*\*\*61.25 \*\*\*\*\*61.25

4.1 TITLE T ☒ Change ☐ Addition

4.2 NAME SLOWIK, STAN JR  
4.3 STREET ADDRESS 1922 WILSON ST  
4.4 CITY-ST-ZIP TAMPA FL 33607

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:

Signature and typed or printed name of signing officer or director

GEORGE H. WATSON, JR

9/22/98 727 507-6307

Date Daytime Phone #

CR2E037 (5/98)