## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

ANNUAL REPORT Secretary of State  1998 DIVISION OF CORPORATION			ONS	Secretary of State	
DOCUMENT # N9700003934 (3)					
OPERATION BOOTSTRAP, INC.					1 (BA)(48) (## 1844) (##1 BA)(   BA)(   BA)(   BA)(   BA)(   BA)(   BA)(   BA)(   BA)(   BA)
Principal Place of Business Mailing Address					i (Samas ara ram 1961) Sam Sam Sam Sam Sam Link rama wit sis (Sa
2335 22ND AVE., 8OUTH 2335 22ND AVE., SOUTH ST. PETERSBURG FL 33712 ST. PETERSBURG FL 33712					3. Date Incorporated or Qualified 07/08/1997
					4. FEI Number Applied For Not Applied Box Not Applied For Not Applied Box Not Applied For Not
2. Principal Place of Business		2a. Mailing Address 26		·	5. Certificate of Status Desired Service Servi
<del></del>		Suite, Apl. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be
22 City & State					Trust Fund Contribution Added to Fees
City & State City & State				7. Is this nonprofit corporation a homeowners association?	
Zip	Country	Zip	<del></del>		8. This corporation owes or has paid the current year Intangible
24	4 25 29 30 30 9. Name and Address of Current Registered Agent		0]		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
	a. Hallio alto Addiess of Carlett	( riogistorau Agoin	81	Name	10. Haire and reduces of How hogistered Agent
ELLIS, BENJAMIN D SR			82	Street Addr	ress (P.O. Box Number is Not Acceptable)
1228 7TH AVE., S.			83	<u> </u>	
ST. PETER <b>SB</b> URG FL 33713					
			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 egent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND		13.	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME	MILIO PRALIALMA DOD		1.1 TITLE 1.2 NAME	İ	Change Addition
STREET ADDRESS	4000 771 445 0		1.3 STREET ADDRESS		
CITY-ST-ZIP	OT DETENDING EL 20740		1.4 CITY - 5		
TITLE	D				Change Addition
NAME			2.2 NAME		
STREET ADDRESS	ST DETEROPURA EL ANTA		2.3 STREET	ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33734			ST-ZIP	☐ Change ☐ Addition
TITLE NAME	POWELL, R. RICK	C petruc	3.1 TITLE 3.2 NAME		Citanilla National
STREET ADDRESS	4004 5071 415 0		3.3 STREET	ADDRESS	
CITY-ST-ZIP	<b>ST. PETERSBURG FL 33705</b>		3.4. CITY-	l l	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME	-	
STREET ADORESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY - S	ST-ZIP	Change Addition
TITLE NAME	<b>.</b>		5.1 TITLE 5.2 NAME		FT CUSURE FT AGRICU
STREET ADDRESS	•		5.2 NAME 5.3 STREET	ADDRESS	
CITY-ST-ZIP			5.4 CITY-S	i i	
TITLE		DELETE	6.1 TITL€		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	ADDRESS	

14. Thereby 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.

813.518.1138

Jun 11 1998 8:00am