

FILE NOW: FILING FEE IS \$61.25

FILED

**May 06 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 # N97000006100 (8)
1. Corporation Name
GERMAN-AMERICAN BUSINESS COUNCIL OF TAMPA BAY, INC.



Principal Place of Business 4830 W. KENNEDY BLVD., SUITE 750 TAMPA FL 33609	Mailing Address 4830 W. KENNEDY BLVD., SUITE 750 TAMPA FL 33609
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3. Date Incorporated or Qualified
10/15/1997

4. FEI Number 59-3479089	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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6. 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
**McFARLAND, JOSEPH B
4830 W. KENNEDY BLVD., SUITE 750
TAMPA FL 33609**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAUSER, BARBARA	1.2 NAME	
STREET ADDRESS	2042 DIAMOND CT.	1.3 STREET ADDRESS	
CITY-ST-ZIP	OLDSMAR FL 34677	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BIERLEY, JOHN C	2.2 NAME	
STREET ADDRESS	5414 LYKES LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33611	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSANSKY, PHYLLIS	3.2 NAME	Treasurer
STREET ADDRESS	3611 SCHESSLERA DR.	3.3 STREET ADDRESS	John Davidson
CITY-ST-ZIP	TAMPA FL 33618	3.4 CITY-ST-ZIP	2032 Bayshore Blvd.
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELBE, GEORGE A	4.2 NAME	Dunedin, FL 34698
STREET ADDRESS	12912 HICKORYWOOD LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	LARGO FL 34644	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLYNN, WILLIAM J III	5.2 NAME	
STREET ADDRESS	2534 ANDERSON DR. W.	5.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34621	5.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANGER, PETER	6.2 NAME	
STREET ADDRESS	334 E. LAKE RD. #288	6.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL 34685	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 *Barbara Hauser* **Barbara Hauser Pres** 2/12/98 813-902-0066

CR2E037 (10/97)