

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
May 13 1998 8:00am
Secretary of State

DOCUMENT # P96000064077 (6)

1. Corporation Name

TAMPA BAY BABY MAGAZINE, INC.



Principal Place of Business

Mailing Address

3312 HARBOR VIEW
TAMPA FL 33611

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TAMPA FL 33611

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1996

4. FEI Number

59-3407174

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FERGUSON, CAROL A
3312 HARBOR VIEW
TAMPA FL 33611

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 607.0502 and 607.1508, 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 607.0505, 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

P
NAME FERGUSON, CAROL A
STREET ADDRESS 3312 HARBOR VIEW
CITY-ST-ZIP TAMPA FL

11 TITLE ☐ Change ☒ Addition

TITLE ☐ DELETE

V
NAME SMITH, CONSTANCE C
STREET ADDRESS 48950 US 19 N, MAIL STATION TOT-2
CITY-ST-ZIP CLEARWATER FL

12 NAME ☒ Change ☐ Addition

TITLE ☐ DELETE

S
NAME ASHCRAFT, ANN
STREET ADDRESS 810 W KENNEDY BLVD
CITY-ST-ZIP TAMPA FL

13 STREET ADDRESS 2735 Whitney Road
2 CITY-ST-ZIP Clearwater, FL 33760

TITLE ☐ DELETE

T
NAME MARLOWE, ROBERT C
STREET ADDRESS 6701 FOREST AVE, SUITE 1
CITY-ST-ZIP NEW PORT RICHEY FL

31 TITLE ☒ Change ☐ Addition
32 NAME
33 STREET ADDRESS 3108 W. Azeele St.
34 CITY-ST-ZIP Tampa, FL 33609

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE ☐ Change ☒ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP Zip: 34653

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Carol A. Ferguson

4/24/98

813/837-4856

CR2E034 (10/97)