## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 701093** 

FILED Apr 10, 2012 Secretary of State

Entity Name: YE MYSTIC KREWE OF GASPARILLA

Current Principal Place of Business: New Principal Place of Business:

1114 W CASS ST TAMPA, FL 33606 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1514 TAMPA, FL 33601 US

FEI Number: 59-0552523 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARROLL, PHILIP R

1114 W CASS ST

TAMPA, FL 33606 US

BARNES, DONALD J

1114 W CASS ST

TAMPA, FL 33606 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DONALD J. BARNES 04/10/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: VON THRON, JAMES C M.D.
Address: 4504 WOODMERE RD.
City-St-Zip: TAMPA, FL 33609

Title: 7

Name: CASSIDY, WILLIAM A Address: 2507 W. PROSPECT RD. City-St-Zip: TAMPA, FL 33629

Title: S

Name: ANNIS, JEFFREY S Address: 3621 JETTON AVE. City-St-Zip: TAMPA, FL 33629

Title: VF

Name: CARSON, WILLIAM G JR. Address: 5008 JUNO ST. City-St-Zip: TAMPA, FL 33629

Title: D

Name: CHAPMAN, RICHARD M III Address: 49 ALBEMARLE AVE City-St-Zip: TAMPA, FL 33606

Title: [

Name: DIVERS, BRETT D Address: 4502 W. CULBREATH AVE. City-St-Zip: TAMPA, FL 33609

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DONALD J. BARNES EO 04/10/2012