## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#735700** 

FILED Jaņ 13, 2<u>00</u>5 Secretary of State

Entity Name: MEALS ON WHEELS OF TAMPA, INC.

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

550 W. HILLSBOROUGH AVE. TAMPA, FL 33603302 US

**Current Mailing Address: New Mailing Address:** 

550 W. HILLSBOROUGH AVE. TAMPA, FL 33603302 US

FEI Number: 59-1679915 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:

JESKE, PAUL 1904 E. BUSCH BLVD. TAMPA, FL 33612

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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition ( ) Delete GOODSON, MARGARET Name: SMITH, CATHY PRESIDE Name: 1416 E HANNA AVE Address: 16204 N. FLORIDA AVENUE Address: TAMPA, FL LUTZ, FL 33549

City-St-Zip: City-St-Zip:

Title: Title: MRS. (X) Change ( ) Addition ( ) Delete COCHRAN, SUSIE Name: VANN, CINDY VP Name:

Address: 319 FERN CLIFF AVE Address: 2605 HAWTHORNE CIRCLE City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: TAMPA, FL 33629

Title: () Delete Title: (X) Change ( ) Addition SHIMBERG, AMY PATTERSON, EILEEN SECRETA Name: Name:

10102 WHITE TROUT LANE Address: Address: 19706 ANGEL LANE City-St-Zip: TAMPA, FL 33618 City-St-Zip: ODESSA, FL 33556-391

Title: ED ( ) Delete Title: MS. (X) Change ( ) Addition Name: GORDON, DEBRA A Name: GORDON, DEBRA A

550 W. HILLS BOROUGH AVENUE Address: Address: 550 W. HILLS BOROUGH AVENUE

City-St-Zip: TAMPA, FL 33603 City-St-Zip: TAMPA, FL 33603

Title: ( ) Delete Title: (X) Change ( ) Addition MCKAY, JOAN TESMER, JOHN TREAS Name: Name:

3408 ALMERIA 108 ALAMEDA CT., APT 233 Address: Address: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33609

City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition SHIMBERG, AMY ASST TR SMITH, CATHY Name: Name: Address: 16204 N. FLORIDA AVENUE Address: 10102 WHITE TROUT LANE

TAMPA, FL 33549 City-St-Zip: TAMPA, FL 33618 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DEBRA GORDON MS. 01/13/2005