




**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**May 10, 2004 8:00 am**  
**Secretary of State**

04-15-2004 90006 011 \*\*\*\*61.25

<b>DOCUMENT # 738301</b>					
1. Entity Name <b>TAMPA CROSSROADS, INC.</b>					
Principal Place of Business <b>5120 N. NEBRASKA AVENUE TAMPA FL 33603</b>			Mailing Address <b>5120 N. NEBRASKA AVENUE TAMPA FL 33603</b>		
2. Principal Place of Business <i>Same</i>		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-1743719</b>	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>GISSENDANNER, BUDDY 1726 E. 7TH AVENUE TAMPA FL 33605</b>			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b> Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		Signature, typed or printed name of registered agent and title if applicable. <b>Buddy Gissendanner</b> <i>4/12/04</i> <b>President Board.</b>			
<b>FILE NOW. FEE IS \$61.25</b> <b>Due By: May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		<b>Make Check Payable to Florida Department of State</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>BROWN, ELLEN</b>		NAME		
STREET ADDRESS	<b>3308 E SEVILLA CIR</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>TAMPA FL 33629</b>		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>CAREY, KEVIN</b>		NAME		
STREET ADDRESS	<b>P O BOX 3239 N/A</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>TAMPA FL 33601</b>		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>PARRISH, DAVID C</b>		NAME		
STREET ADDRESS	<b>P O BOX 3371 N/A</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>TAMPA FL 33601</b>		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>FERRARO, JOSEPH</b>		NAME		
STREET ADDRESS	<b>1511 N WESTSHORE BLVD, STE 600</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>TAMPA FL 33607-4523</b>		CITY-ST-ZIP		
TITLE	CO	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>MOORE, M. VERNON</b>		NAME		
STREET ADDRESS	<b>PO BOX 11825</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>TAMPA FL 33680</b>		CITY-ST-ZIP		
TITLE	CD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>SECKEL HUNTER ESQ., SHERYL</b>		NAME		
STREET ADDRESS	<b>THE CARRIAGE HOUSE BIGLOW-HELMS MANSION</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>TAMPA FL 33611</b>		CITY-ST-ZIP		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Date: <i>4/12/04</i>		Daytime Phone #: <i>813-242-4040</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

**66420793**



MOORE CR2E037 (11/03)

Local 20793  
Albany, NY 738301

**Tampa Crossroads, Inc.**  
**2003-2004 Board of Directors**  
**Officers**

*Chair:*

Buddy Gissendanner, Esq.  
1726 E. 7<sup>th</sup> Avenue  
Tampa, FL 33605  
(o) 242-4040 (f)  
(H) 258-3895  
Email: BuddyEJG@aol.com

*President Elect*

Pat Kemp, Esq.  
5118 Seminole Ave.  
Tampa, FL 33603  
(H) 237-1235 (O) 232-1222 ext 141  
Email: pkemp@bals.org (1999)

*Secretary:*

Julianne Holt, Esq.  
Public Defender 13<sup>th</sup> Circuit  
PO Box 172910  
Tampa, FL 33672  
(o) 307-4000  
[jholt@pd13.state.fl.us](mailto:jholt@pd13.state.fl.us) (2002)

*Treasurer: RESIGNED MAY 2003*

M. Vernon Moore  
Sims Crane & Equipment  
PO Box 11825  
Tampa, FL 33680  
(O) 626-8102  
Email: [vernon@sims Crane.com](mailto:vernon@sims Crane.com) (2000)

*Immediate Past Chair*

Sheryl Seckel Hunter, Esq. P.A.  
Hunter & Thomas  
Carriage House Biglow-Helms  
Mansion  
4807-A Bayshore Blvd.  
Tampa, FL 33611  
(o) 835-8405 (f) 835-1745 (h) 839-0450  
email: [shunter@hunterthomaslaw.com](mailto:shunter@hunterthomaslaw.com)  
(1999)

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Attachments 738301  
Tampa Crossroads, Inc.  
2003-2004 Board of Directors  
Officers

Thomas Barber, Esq.  
Carlton Fields  
P.O. Box 3239  
Tampa, FL 33601  
(o) 223-7000  
email: [tbarb@carltonfields.com](mailto:tbarb@carltonfields.com) (1999)

Gabe Hunter  
UAMC  
4902 Eisenhower Blvd., Suite 210  
Tampa, FL 33634  
(o) 249-7668 (f) 249-7170  
Email: [ghunter@lfsi.com](mailto:ghunter@lfsi.com) (2000)

David Braughton  
Big Brothers Big Sisters  
405 N. Reo St., Ste 260  
Tampa, FL 33609  
(o) 287-2210 (f) 286-3629  
email: [dbraughton@lslink.com](mailto:dbraughton@lslink.com) (2002)

Brenda Pelizzon  
Office of the State Attorney  
800 E. Kennedy Blvd.  
Tampa, FL 33602  
(813) 274-1936(o)  
[pelizzon\\_b@sao13th.com](mailto:pelizzon_b@sao13th.com) (2002)

G. Michael Carnes, CPA  
Carter, Belcourt & Atkinson, P.A.  
109 North Brush Street, Suite 300  
Tampa, FL 33602-4159  
(o) 223-9260 (f) 229-5952  
email: [michael.carnes@cbanet.com](mailto:michael.carnes@cbanet.com)  
(2001)

Charlotte G. Dixon, Rh.D., CRC  
University of South Florida  
Department of Rehab. Counseling  
4202 E. Fowler Ave, BEH 315  
Tampa, FL 33620-8100  
(o) 974-0973 (h) 632-6981 (f) 974-  
8080  
email: [dixonc7@aol.com](mailto:dixonc7@aol.com) (1999)

Dave Finkel  
2404 W. Jetton Ave.  
Tampa, FL 33629  
259-9616 (f) 259-9965  
email: [davefinkel@aol.com](mailto:davefinkel@aol.com) (2003)

Mary M. Frost  
821 S. Delaware Ave  
Tampa, FL 33606  
(H) 251-3801  
Email: [cafedmonde@aol.com](mailto:cafedmonde@aol.com) (1999)