3/2 2000 UNIFORM BUSINESS REPORT (UBR) DÖCUMENT # **738633** May 04, 2000 8:00 am Secretary of State 1. Entity Name TAMPA METROPOLITAN AREA YMCA, INC. 03-20-2000 90044 048 ****61.25 Mailing Address Principal Place of Business 110 E OAK AVE 110 E OAK AVE P.O. ROX 172428 P.O. BOX 172428 TAMPA FL 33872-0428 TAMPA FL 33672-7428 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1742909 Not Applicable \$8.75 Additional Country Zip Country Zip ! 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) MANGIONE, RALPH P WILLIAMS, REED, WEINSTEIN, ET AL 1 TAMPA CITY CTR #2600 Zip Code City **TAMPA FL 33602** 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: Élection Campaign Financing \$5.00 May Be frust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (66/6)TITLE CD ☐ Delete TITLE NAME KING, GUY NAME CR2E037 STREET ADDRESS STREET ADDRESS 110 E OAK AVE CITY-ST-ZIP CITY-ST-ZIF TAMPA FL X Change ☐ Addition Delete TITLE VCD Vice Chairman TITLE SNYDER, BET NAME Virginia Johnson STREET ADDRESS STREET ADDRESS 110 E OAK AVE 110 E Oak CITY-ST-ZIP CITY-ST-ZIP <u>tampa fl</u> Tampa, Fl Change □ Addition SD Delete TITLE TITLE Secretary JOHNSON, VIRGINIA NAME NAME David Brownlee STREET ADDRESS STREET ADDRESS 110 E OAK AVE 110 E Oak Ave Tampa, Fl CITY-ST-ZIP CITY-ST-ZIP TAMPA FL : [X] Change Addition TITLE TITLE TD Delete Treasurer NAME Brownlee, David NAME Scott Luttrell STREET ADDRESS STREET ADDRESS 110 E OAK AVE 110 E. Oak CITY-ST-ZIP CITY-ST-ZIP TAMPA FL Tampa, Fl ☐ Addition Change Delete TITI F TITLE GILBERTSON, JR., ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 110 E OAK AVE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS 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 trustle 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:

WAT MIXATER REQUIRED IN ANIE OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #