


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # F04000006604

1. Entity Name
PERA CITY PLAZA TAMPA, INC.



Principal Place of Business Mailing Address

**950 17TH STREET STE. 1850
DENVER, CO 80202** **950 17TH STREET STE. 1850
DENVER, CO 80202**

DO NOT WRITE IN THIS SPACE



01052006 No Chg-NP CR2E037 (11/05)

4. FEI Number 20-1837116	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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]* *Vice President* DATE: 1.17.06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is **\$61.25** Due by **May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C PAQUETTE, JENNIFER 1300 LOGAN STREET DENVER, CO 80203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JUDGE, WADE 950 17TH STREET STE 1850 DENVER, CO 80202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SPRITZER, KATHRYN G 950 17TH STREET STE. 1850 DENVER, CO 80202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCHAFF, PETER H 200 E RANDOLPH DRIVE CHICAGO, IL 60601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WOODROW, KIMBALL C 200 E. RANDOLPH DRIVE CHICAGO, IL 60601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000424190
02/18/06-80033-001 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *[Signature]* *Vice President* DATE: 1/17/06 303.260.6513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytona Phone #