

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

0040817

DOCUMENT # N39433

1. Entity Name

THE TAMPA BAY ADVERTISING FEDERATION, INC.

02-05-2002 90027 022 *****61.25

Principal Place of Business

Mailing Address

11812-A N 56TH ST
 TAMPA FL 33617
 US

11812-A N 56TH ST
 TAMPA FL 33617
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3072029**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JEFFCOAT, SARAH
 11812-A N 56TH STREET
 TAMPA FL 33617

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE Sarah Jeffcoat
 Signature, typed or printed name of registered agent and title if applicable.

Executive Director
 (NOTE: Registered Agent signature required when reinstating)

1/15/02
 DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME SCHMIDT, MARK ☐ Delete
 STREET ADDRESS 5912 W SITKA STREET
 CITY-ST-ZIP TAMPA FL 33634

TITLE PD ☒ Change ☐ Addition
 NAME Sutherland, Marc
 STREET ADDRESS 5915 N Lynn Ave
 CITY-ST-ZIP Tampa, FL 33604

TITLE VD ☐ Delete
 NAME SUTHERLAND, MARC
 STREET ADDRESS 1433 GULF-TO-BAY BLVD STE F
 CITY-ST-ZIP CLEARWATER FL 33755

TITLE D ☒ Change ☐ Addition
 NAME Schmidt, Mark
 STREET ADDRESS 5912 W Sitka St.
 CITY-ST-ZIP Tampa, FL 33634

TITLE M ☐ Delete
 NAME JEFFCOAT, SARAH
 STREET ADDRESS 11812-A N 56TH STREET
 CITY-ST-ZIP TAMPA FL 33617

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD ☒ Delete
 NAME NADLER, NAN
 STREET ADDRESS 4405 SUMMER OAK DRIVE
 CITY-ST-ZIP TAMPA FL 33624

TITLE SD ☐ Change ☒ Addition
 NAME Liu, Scott
 STREET ADDRESS 5111 Stonehurst Rd.
 CITY-ST-ZIP Tampa, FL 33647

TITLE T ☒ Delete
 NAME HOMA, DIANE
 STREET ADDRESS 12467 62ND ST N, #103
 CITY-ST-ZIP LARGO FL 33773

TITLE TD ☐ Change ☒ Addition
 NAME Clydesdale, Bob
 STREET ADDRESS 826 21st Ave
 CITY-ST-ZIP St. Petersburg, FL 33704

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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 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:

SARAH JEFFCOAT
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/02
 Date

813-879-8223
 Daytime Phone #

CR2E037 (9/01)