

2002 UNIFORM BUSINESS REPORT (UBR)

5/10

FILED
Jun 19, 2002 8:00 am
Secretary of State

05-16-2002 90044 014 ****61.25

DOCUMENT # N41355

1. Entity Name

TAMPA BAY TREASURY MANAGEMENT ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 21525
TAMPA FL 33622
US

P.O. BOX 21525
TAMPA FL 33622
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

59-3072469

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

SKIPPER, DEBRA
360 CENTRAL AVENUE
SAINT PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name **Ronald D. Whitaker**
Street Address (P.O. Box Number is Not Acceptable) **880 Carillon Parkway, 12G**
City **St. Petersburg** FL Zip Code **33716**

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

Ronald D. Whitaker

4/26/02

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

(NOTE: Registered Agent signature required when reinstating)

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

TITLE	DS	☒ Delete
NAME	SKIPPER, DEBRA	
STREET ADDRESS	360 CENTRAL AVENUE	
CITY-ST-ZIP	SAINT PETERSBURG FL 33701	
TITLE	OV	☒ Delete
NAME	DESTASIO, GERALDINE	
STREET ADDRESS	201 E. KENNEDY BLVD. #1800	
CITY-ST-ZIP	TAMPA FL 33602	
TITLE	OT	☐ Delete
NAME	WHITAKER, RONALD	
STREET ADDRESS	880 CARILLON PKWY 12G FL 12G	
CITY-ST-ZIP	SAINT PETERSBURG FL 33716	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☐ Change ☒ Addition
NAME	Linda L. Busby	
STREET ADDRESS	880 Carillon Parkway	
CITY-ST-ZIP	St. Petersburg, FL 33716	
TITLE	Vice President	☐ Change ☒ Addition
NAME	William Parden	
STREET ADDRESS	Davis Island	
CITY-ST-ZIP	Tampa, FL 33606	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	880 Carillon Parkway, 12G	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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)(f), 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:

Ronald D. Whitaker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/02 727-5733800

CR2E037 (9/01)