2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N99000001712

Oct 07, 2005 Secretary of State

Entity Name: THE TAMPA BAY CHAPTER OF THE SOCIETY FOR MARKETING PROFESSIONAL SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

5830 W. CYPRESS ST. SUITE C 14025 RIVEREDGE DRIVE, SUITE 550

TAMPA, FL 33607 US TAMPA, FL 33637 US

Current Mailing Address:

5830 W. CYPRESS ST. SUITE C 14025 RIVEREDGE DRIVE, SUITE 550

TAMPA, FL 33609 US TAMPA, FL 33637 US

FEI Number: 59-3562702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

New Mailing Address:

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEONARD, ESTHER WEIK, SCOTT A

5830 W. CYPRESS ST. SUITE C 14025 RIVEREDGE DRIVE, SUITE 550

TAMPA, FL 33607 US TAMPA, FL 33637 US

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: SCOTT A. WEIK 10/07/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: P (X) Change () Addition

Name: CORCORAN, SHANNON Name: DORNBLASER, CYNDEE
Address: 10500 UNIVERSITY CTR. DR. #155 Address: 2102 A. W. HORATIO ST.

City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33606 US

Title: P () Delete Title: PP (X) Change () Addition Name: LEONARD, ESTHER Name: LEONARD, ESTHER

Name. LEONARD, ESTHER Name. LEONARD, ESTHER
Address: 5830 W. CYPRESS ST. SUITE C Address: 5005 W. LAUREL STREET #102

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607

Title: S () Delete Title: S (X) Change () Addition

Name: COVINGTON, DEE Name: JAIKARAN, ANOOPA

 Address:
 600 S. MAGNOLIA AVE. #150
 Address:
 601 N. ASHLEY DRIVE #100

 City-St-Zip:
 TAMPA, FL 33606 US
 City-St-Zip:
 TAMPA, FL 33602

Title: VP () Delete Title: T (X) Change () Addition Name: DORNBLASER, CYNDEE Name: WEIK, SCOTT A

Address: 2102 A. W. HORATIO ST. Address: 14025 RIVEREDGE DRIVE, SUITE 550

City-St-Zip: TAMPA, FL 33609 US City-St-Zip: TAMPA, FL 33637 US

Title: PP () Delete Title: CT (X) Change () Addition

 Name:
 KOZERA, CHESTER
 Name:
 FOUNTAIN, STEPHANIE

 Address:
 4019 E. FOWLER AVE.
 Address:
 5313 JOHNS ROAD #201

 City-St-Zip:
 TAMPA, FL 33617
 City-St-Zip:
 TAMPA, FL 33634

Title: T (X) Delete Title: () Change () Addition

 Name:
 FOUNTAIN, STEPHANIE
 Name:

 Address:
 4307 GOLF CREST COURT
 Address:

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT A. WEIK T 10/07/2005